



Sussex County Scholastic Sailing Association

Fall High School Sail Racing Program (Full Program)

Tuesday, October 10, 2023 through Sunday, October 22, 2023
RACE Dates: October 15, 22,

Sunday Racing: First Start 2:00 PM, Last Start Before 5:00 PM

For Regattas, plan to be on site 45 minutes before first start.

Assignments 30 minutes before first start.

Sailors not on site for assignments may not receive an assignment.

Tuesday and Thursday practice 3:30-6pm

All sailing is at Rehoboth Beach Sailing Association unless otherwise noted

Sailor's Name _____ Cell phone _____

High School _____ Grad Year _____

Sailor's Email address _____

Mother's Name _____ cell phone _____

Father's Name _____ cell phone _____

Home Phone _____ Home Email _____

Street _____

City, State, Zipcode _____

Cost: \$200.

Includes Boat Lease Fee, Club Use Fee, Coaching Costs.

Transportation, Uniforms, Life jacket and weather appropriate clothing are not included in these costs.

\$ _____ is enclosed. (Checks made payable to Lewes Yacht Club; larger teams may collect fees and submit a single check to LYC).

-- Note: Space is limited and on a first come first served basis.

Sailors may not participate until this FIVE (5) PAGE FORM is submitted with payment.

Parental Signatures REQUIRED on Waiver - Med Slip - and Statement of Understanding.

ASSUMPTION OF RISK AND WAIVER

READ CAREFULLY AS THIS AFFECTS YOUR LEGAL RIGHTS

I, (the "Participant") will be participating in the use of Rehoboth Bay Sailing Association's (RBSA) waterfront, and/or vessel (collectively, the "RBSA Facilities") as captain, crew, participant, or spectator, as well as Lewes Yacht Club (LYC) and understand that **I will be exposed to above normal inherent risks of accident, injury or death.**

In consideration of and as a strict condition of my use of the RBSA facilities, I intend to be legally bound by this **WAIVER, RELEASE and AGREEMENT**. I also understand that I share the responsibility with each crew member for my safety and the safety of all on board any vessel, or otherwise using/participating in any of the RBSA facilities. I acknowledge the risks associated with these activities and therefore assume personal responsibility for them.

Further, I acknowledge that I have verified with my physician(s) that I have no physical or psychological conditions that would prohibit or adversely affect my participation in my use of said RBSA facilities and participation in such activities. I will disclose and discuss any concerns that I have about my physical or emotional abilities and the condition of the facilities and/or vessel and its equipment and my decision to participate is made solely in my discretion and responsibility.

As captain, crew, participant, or spectator, **I assume all risks of accident, injury, and loss of life**, for myself and for my heirs, executors, administrators and personal representatives. **I do hereby fully and forever RELEASE, DISCHARGE, and HOLD HARMLESS/ INDEMNIFY and agree not to sue or otherwise make a claim against RBSA and/or LYC**, its officers, trustees, employees, agents, and/or members and their respective heirs, executors, administrators, successors, and assigns, as well as the captain and crew of any vessel on which I participate (collectively, the "Releasees"), from and against any and all liability, present and future claims, injuries, damages, causes of action, expenses of the crews of any vessels and/or in connection with any waterfront activity, including all other RBSA facilities, each of their respective successors, jointly and severally, including attorney's fees and court costs, rights of contribution, indemnification and any and all other liabilities of any kind or of any nature whatsoever, foreseeable or unforeseeable, that I or any person or entity claiming by, for, or through me, may have or claim to have in the future against any or all of them. I wish to enjoy some or all the RBSA/LYC facilities and/or any vessel, its appurtenances, equipment, recreational facility/activity, and ancillary activities arising from said use and freely give up certain legal rights as set forth in this **WAIVER, RELEASE, AND HOLD HARMLESS/INDEMNIFICATION AGREEMENT**.

I further understand that the foregoing **WAIVER, RELEASE, AND HOLD HARMLESS/INDEMNIFICATION AGREEMENT** includes, without limitation, waiver of any and all claims of injuries, damages, causes of action, expenses, rights of contribution and indemnification and any and all other liabilities which are caused in whole or in part by the negligence or claimed negligence or wrongdoing of any of the aforesaid persons. **I FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.**

Participant Signature: _____

Date: _____ Date of Birth: _____

Member ID #: _____ Program: _____

FOR PARTICIPANTS OF MINORITY AGE (UNDER AGE 18 AT THE TIME OF SIGNING)

This is to certify that I, as parent/guardian, with legal responsibility for the above-named Participant, have read and explained the provisions in this waiver/release to my child/ward including the risks of presence and participation and his/her personal responsibilities for adhering to the rules and regulations for protection against communicable diseases. Furthermore, my child/ward understands and accepts these risks and responsibilities. I, for myself, my spouse, and child/ward do consent and agree to his/her release provided above for all the Releasees and myself, my spouse, and child/ward do release and agree to indemnify and hold harmless the Releasees for any and all liabilities incident to my minor child's/ward's presence or participation in these activities as provided above, EVEN IF ARISING FROM THEIR NEGLIGENCE to the fullest extent provided by law.

Name of parent/guardian: _____

Parent guardian/signature: _____

Date signed: _____

SAILING MEDICAL FORM

Name Used _____

Legal NAME: _____ DATE OF BIRTH: _____

ADDRESS: _____

NAME OF PARENT/GUARDIAN: _____ PHONE _____

NAME OF PARENT/GUARDIAN: _____ PHONE: _____

HEALTH INSURANCE CARRIER _____ INSURANCE ID NUMBER _____

Please check those that apply: *(Provide necessary details below)*

CHRONIC ALIMENTS **ALLERGIES ;**

Asthma or respiratory problems		Medication		
Diabetes or hypoglycemia		Latex		
Hemophilia or bleeding problems		Bee stings/insect bites		
Circulatory or heart problems		If yes, do you carry an EpiPen?		
Epilepsy/seizures		Foods		
Other		Others, if significant		

DATE OF LAST Tdap (Tetanus/Diphtheria/Acellular Pertussis) SHOT: _____

CURRENT MEDICATION AND DOSAGE, IF ANY:

- Use next page for additional information if needed

Please provide other information about any symptoms that your child has showed in the last 14 days such as fever, cough, vomit, diarrhea, etc.;

IN CASE OF EMERGENCY CALL

NAME RELATIONSHIP CELL PHONE

NAME RELATIONSHIP CELL PHONE

PEDIATRICIAN NAME _____

OFFICE NUMBER _____

- the undersigned hereby authorizes LEWES YACHT CLUB AND ITS AUTHORIZED REPRESENTATIVES to obtain such EMERGENCY MEDICAL TREATMENT as may be required for the protection of the health and well-being of _____

I further release, indemnify and hold harmless LEWES YACHT CLUB & RBSA and ITS AUTHORIZED REPRESENTATIVES for obtaining and securing such medical treatment.

X _____ **LYC 2023**

Parent signature

Statement of Understanding

- **Sailors are expected to be able to swim 75 Yards in sailing clothing**
- **Sailors should meet the minimum standards for sailing skills.**
- **Sailors should be self-rescuing and be competent to recover a Sailor overboard and dock DOWNWIND**
- **Sailors are REQUIRED to provide and wear Cold Water Equipment when the combined water / air temp <120 F**
- Unruly, disrespectful, rowdy, vulgar, undisciplined behavior will not be tolerated.
- Unsafe and/or violent behavior is forbidden and may result in immediate removal of privileges.
- Sailors are expected to have complete knowledge of how to rig de- rig.
- Sailors are expected to store equip to LYC Standards and Methods
- Rigging and De-rigging off the wind can damage equipment and is not proper seamanship
- Landing without a full luff in sails is not proper seamanship
- Landing without properly retracting the foils is poor seamanship
- *There will be no refunds for unused portion of program.*

Parent Signature _____

Please Print Sailor's Name _____

Angus Robertson sailingschool@lewesyc.com 610.764.9092 Cell – 302.645.8596 Clubhouse

Allow Lewes YC to post photos containing your child's image to our social media/press releases? YES NO

Additional Medical Information Y/N