HUDSON YACHT CLUB
MOUNT GAY LABOUR DAY REGATTA
SEPTEMBER 3 ~ 5, 2010

This Regatta is open to SLVYRA Association members and boats with a recognized SLVYRA handicap.
YOUR OFFICIAL SLVYRA HANDICAP MUST ACCOMPANY THIS REGISTRATION FORM AND SHOULD BE OBTAINED FROM YOUR CLUB MEASURER.

REGISTRATION FEE: $50.00 inc. taxes

LATE REGISTRATION FEES APPLY TO ALL REGISTRATIONS RECEIVED AFTER NOON FRIDAY, SEPTEMBER 3RD

LATE REGISTRATION FEE: $65.00 inc. taxes

REGATTA REGISTRATION FORM (*PLEASE PRINT CLEARLY*)

Skipper's Name: _____

Address: _____ City: _____

Province/State: _____ Postal/Zip Code: _____

Phone #: _____ Fax #: _____ E-Mail Address: _____

Yacht Club: _____ Membership #: _____

KEELBOATS (only)

Sail #: _____ SLVYRA Handicap:_____

Boat Type/Length: _____ White Sail (YES/NO):_____

Boat Name: _____ Harbour Space (YES/NO):_____

FORM OF PAYMENT:

a.) cash _____ b.) cheque/money order _____ (Payable to HUDSON YACHT CLUB)

c.) club chit # _____ Name of Yacht Club _____

WAIVER OF LIABILITY:
By participating in the Regatta, I understand that I voluntarily assume and am knowledgeable of the risks of sailing. I agree to hold harmless and free of any liability, Hudson Yacht Club Inc., it's members, employees and any other individuals appointed or volunteering to assist with this Regatta, for any damage - material or personal - suffered by me, during the race or otherwise.
I confirm that I have sufficient liability insurance (minimum $1,000,000.00).

_____ _____
Signature Of Yacht Owner Or Skipper Date

_____ _____ _____
Insurance Company Policy Number Policy Period

Fax registration form to 450-458-5141 or email to info@hudsonyachtclub.com