



*Lunenburg Race Week .... In a Day!*  
*June 30<sup>th</sup>, 2007*

**REGISTRATION FORM**

***Competitor Information:***

Skipper Name: \_\_\_\_\_ Member Club: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
Phone(H): \_\_\_\_\_ Email: \_\_\_\_\_

***Boat Information:***

Boatname: \_\_\_\_\_ Boat type: \_\_\_\_\_  
Sail number: \_\_\_\_\_ ASPN rating: \_\_\_\_\_

***Other Information:***

I agree to be bound by the racing rules of the ISAF, the prescriptions of the CYA and the sailing instructions governing this event. I agree to inspection of this yacht by the Race Committee to check compliance with safety and other regulations in effect for this event. I release, hold harmless, and forever discharge the Lunenburg Yacht Club, its employees, directors, successors and assigns, from all actions, causes of action, damages, claims and demands whatever which we have or which we, our heirs, executors, administrators, or assigns may have against the LYC, its employees, successors and assigns, by reason of, or arising out of the participation in LYC organized events. I declare that at least \$1,000,000 public-liability insurance is in full effect on this yacht, including racing activities.

Skipper Signature: \_\_\_\_\_ Date: \_\_\_\_\_

***Payment Information:***

<b>Lunenburg Yacht Club Race Week in a Day - \$30.00 on or before 23 June; \$40 after 23 June</b>	
Payment Method:	<input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> Cheque <input type="checkbox"/> Cash
Card Holder's Name:	
Card Number:	Expiry Date: Month      Year
Card Holder's Authorization <b>Signature:</b> _____ <b>Date:</b> _____	

**Mail advance registration to: Lunenburg Yacht Club, PO Box 820, Lunenburg, NS B0J2C0  
or fax completed application to 484-6557.**