

ROYAL VANCOUVER YACHT CLUB

2010 WEDNESDAY EVENING SERIES

PLEASE CHECK THE BOX BESIDE THE EVENT YOU ARE REGISTERING FOR:

<input type="checkbox"/>	Entire Season	April to September 2010
<input type="checkbox"/>	May Series	April 21-May 12, 2010
<input type="checkbox"/>	June Series	May 19-June 9, 2010
<input type="checkbox"/>	July Series	June 16-July 7, 2010
<input type="checkbox"/>	August Series	July 14 -August 4, 2010
<input type="checkbox"/>	September Series	August 11 -Sept 1, 2010

SAIL NO.: _____ YACHT TYPE: _____ RATING: _____

YACHT NAME: _____ DIV: _____

NAME: _____

TELEPHONE: Home: _____ Work: _____

ADDRESS: _____

CITY: _____ PROV: _____ POSTAL CODE: _____

EMAIL: _____

I AM A MEMBER OF _____ YACHT CLUB.

SEASON ENTRY FEE		INDIVIDUAL SERIES	
MEMBER	NON-MEMBER	MEMBER	NON-MEMBER
No Fee*	\$147.00 (GST/incl)	No Fee*	\$47.25 (GST/incl)

*Registered Owner of Vessel must be RVYC Member in order to qualify for No Fee status.

PAYMENT BY (please check one): Cash Cheque Credit Card

Credit Card Type: _____ CC Number: _____

Name on Card: _____ Exp.: ___/___ Amount: \$_____

RELEASE AND INDEMNITY

I have read the rules and regulations issued for this event or the series of events described in this Registration Form (collectively, the "Event") and I have also read the I.S.A.F "Racing Rules of Sailing". I agree to observe and be bound by the aforesaid Rules and Regulations and the RRS.

In Consideration of acceptance of this entry and of the yacht and crew being permitted to take part in this Event, I irrevocably and unconditionally warrant and agree that: (1) my vessel and myself have, and will at all times maintain, Insurance Coverage for third party liability in an amount not less than one million dollars and that such insurance coverage extends to yacht racing and yacht racing activities of the Royal Vancouver Yacht Club in which I or my yacht shall compete.

Attached to this registration form is a photocopy of the insurance certificate and a valid PHRF BC Certificate (where applicable) for the above named boat. (Failure to provide this invalidates registration.) **RVYC members DO NOT have to supply insurance if already on file with harbor master.**

SIGNATURE: _____

NAME: (Please print) _____

DATE: _____ R.V.Y.C. Member # (if applicable): _____