



Newport Yacht Club

Chartered 1894
P.O. Box 488
Newport, Rhode Island 02840
401-846-9410

2001 SPRING / SUMMER CRUISING AND ONE DESIGN SERIES REGISTRATION

Complete this form and sign the liability waiver. Check off the appropriate spaces for the series you plan to participate in and mainsail or hull number as appropriate. (All sail numbers to be the same!)

Registration fees are \$60 for Newport Yacht Club members, \$70 for non-members. This fee includes the Spring and Summer series for the yacht indicated on this form. A 10% discount will be given with evidence of a **US Sailing Membership Number. Owner/Skipper:** _____

US Sailing Membership No. _____

Return this form to the Regatta Committee, Newport Yacht Club, with entry fees. Make checks payable to the Newport Yacht Club.

All cruising yachts **MUST** submit a valid 2001 PHRF of Narragansett Bay rating certificate with this form.

ALL REGISTRATION FORMS AND FEES MUST BE RECEIVED BY NEWPORT YACHT CLUB BEFORE A YACHT WILL BE SCORED IN A RACE

Name: _____	Phone: (w) _____	Series: Spring Cruising _____
Address: _____	(h) _____	Summer Cruising:
City, State, ZIP _____	Hull Number _____	Spinnaker _____
Yacht Name: _____	Sail Number _____	Non-Spinnaker _____
Yacht Type/Class: _____	PHRF Rating- w/ Spinnaker: _____ w/o Spinnaker: _____	Summer One-Design _____

LIABILITY WAIVER

The undersigned intends to participate in sailing races supported by Newport Yacht Club. The undersigned hereby waives any claims, causes of action or any type of demand whatsoever against Newport Yacht Club, its respective officers, volunteers, or employees, that the undersigned and his/her crew may have or in the future may have against Newport Yacht Club for any bodily injury or death suffered by the undersigned or suffered by my his/her crew or for any damage to any boat or other property incurred while involved in any race, training, regatta or related activities. As skipper/owner, I agree that I shall inform all crew members of this waiver, and obtain their agreement to the conditions of this waiver. I am executing this release in accordance with Section 7-6-9 of the General Laws of Rhode Island.

SIGNATURE _____

DATE _____

NAME (please print) _____