2023 FROSTBITE REGISTRATION FORM

Name:			
Address:			
City, State:		Zip	
Phone: (hon	ne)	Cell:	
Yacht Club	affiliation		
Email:			
Past Qualify	ing year(s)		
FEES: Plea	ase check the appropriate box.		
<u>Members</u>			
	lar or adult family member r member	\$150.00 \$75.00	
	ers (accorded limited membership prives, Section 4 of the NYC Bylaws)	rileges while participating in frostbite activities	es per
[] Adult	Newport Resident non-Newport Resident r (14 - 17)	\$200.00 \$225.00 \$75.00	
	LIABIL	ITY WAIVER	
Newport Ya agents or en mine, incurr NYC. I here	cht Club (NYC), its officers, agents or aployees shall not be liable for any boo ed while I am involved in any race, tra	general laws, I hereby waive any liability that employees might have for, and agree that the dily injury to me, or damage to any boat or praining, regatta or other related activity sponsor property damage arising while practicing for ted by the NYC	eir officers, coperty of ored by the
Participant Signed:		Date:	
	ardian if participant is under 18	Date:	

Return this signed form with your check made payable to:

Newport Yacht Club 110 Long Wharf Newport, RI 02840