

2009 SNAME CUP ANNUAL REGATTA

Sail Newport
Newport, Rhode Island
October 24, 2009



ENTRY FORM

Name: _____
(First) (MI) (Last)

SNAME # _____ Email Address: _____

Mailing Address: _____

If entering a team:

Crew: _____ SNAME # _____

Crew: _____ SNAME # _____

Please sign me up for one of the following (See Notice of Race):

Regatta Team (3 sailors per team)	team	@ \$ 500.00	: \$ _____ .00
Regatta Individual (boats assigned)	each	@ \$ 100.00	: \$ _____ .00
Regatta Student (boats assigned)	each	@ \$ 50.00	: \$ _____ .00

and each of the following:

Continental Breakfast	each	@ \$ 7.00	: \$ _____ .00
Box Lunch	each	@ \$ 15.00	: \$ _____ .00
Reception/Dinner @ museum	each	@ \$ 80.00	: \$ _____ .00
Bus Transport to/from Newport/Bristol	each	@ \$ 25.00	: \$ _____ .00

Total \$ _____ .00

OR PAY LESS BY REGISTERING FOR THE PACKAGE DEAL:

Package Deal Team	team	@ \$ 800.00	: \$ _____ .00
Package Deal Individual	each	@ \$ 200.00	: \$ _____ .00
Package Deal Student	each	@ \$ 125.00	: \$ _____ .00

(Package deal includes regatta, transportation, and meals)

Submit form and funds to:

SNAME Cup Regatta
Society of Naval Architects and Marine Engineers
601 Pavonia Ave
Jersey City, NJ 07306

Make Checks Payable to:

SNAME Cup Regatta

Note: ALL participants are required to sign and submit the attached Regatta Waiver

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WAIVER AND RELEASE OF LIABILITY

The undersigned acknowledges that participation in the sport of yachting and/or competitive sailing involves substantial risk of personal injury or even death and property damage. The undersigned hereby assumes the risk of any such injury and/or property damage that may occur while practicing for or participating in the First Annual SNAME Regatta (herein the "Event").

In consideration of being allowed to participate in the Event, on behalf of myself, my heirs, successors and assigns, I hereby waive and release any and all claims, actions, suits and demands against the Society of Naval Architects and Marine Engineers (a/k/a SNAME), and its officers, directors, employees, and members, all corporate sponsors of the Event, and all host organizations of the Event, including Sail Newport, and all of its or their respective directors, officers, trustees, employees, agents, and members, all of whom or which are incorporated by reference herein, and collectively referred to as "Releasees," for any personal injury (including death) or property damage resulting from the negligence or other acts or omissions by any of the Releasees as a result of my participation in the Event. My waiver and release granted herein are given knowingly, voluntarily and with a full appreciation of the risks of yachting and competitive sailing.

This Waiver and Release of Liability is executed in accordance with and shall be governed by the laws of the State of New Jersey.

I HAVE CAREFULLY READ THIS WAIVER AND RELEASE OF LIABILITY AND FULLY UNDERSTAND ITS CONTENTS.

WITNESS

SIGNATURE _____

NAME (PRINT) _____

ADDRESS _____

CITY _____

STATE _____ ZIP _____

PARTICIPANT

SIGNATURE _____

NAME (PRINT) _____

ADDRESS _____

CITY _____

STATE _____ ZIP _____

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SAILING RESUME

Name: _____

Phone Number: _____ Email Address: _____

Years of experience:

Dinghy sailing _____ Dinghy Racing _____

Keelboat sailing _____ Keelboat racing _____

State any class titles and year: _____

State the last major regatta attended: _____

State your college racing experience: _____

Please give a brief statement of sailing experience, and specific racing experience. Include experience with both dinghies and keel boats.

Email or Fax completed form to: Ken Lane
klane@ebdg.com
206-782-3449 (fax)
206-204-1313 (phone)

If submitting a team application, include a resume for each team member.