



DELL QUAY SAILING CLUB
Frostbite Series 2020-21 Open Meeting
ENTRY FORM to be sent to: sailingsecretary@dellquaysc.co.uk



- (i) By signing this entry form, participants accept that they are responsible for themselves, their crew, and their boats, whether afloat or ashore.
- (ii) Nothing done by the organisers (i.e. the club, race management team, patrol craft and anyone helping to run the event) will relieve participants of their responsibilities.
- (iii) By launching participants imply the suitability of their boat and the competence of the helm and crew for the expected or forecast conditions.
- (iv) The provision of patrol craft does not relieve participants of their responsibilities. Although reasonable efforts will be made to provide patrol boat cover, competitors are reminded that, particularly in extreme weather conditions, cover should not be relied upon, and in any event they can only be given such assistance as can be practically provided in the circumstances. This is particularly relevant in winter and spring sailing where the risk of hypothermia is at its highest.
- (v) General Data Protection Regulations 2018. Competitors contact details maybe given to other competitors with a valid need (e.g. parties to protest). Personal Data will be handled in accordance with the Dell Quay Sailing Club Privacy Policy. **I agree by ticking the below box that the use of my name and any related photos/images can be used for publicity purposes.**
- (vi) Competitors must comply with government guidance and DQSC Covid-19 Racing policy [\[LINK\]](#).

DECLARATION

I agree to be bound by the Racing Rules of Sailing and all other rules that govern this event. In particular, I have read the paragraph above and confirm that I agree to its provisions and that my boat will conform to its requirements throughout the event. **I declare that during the event the boat will have valid and current third party insurance of at least £2m.**

Helm: *(signature)*

PARENT/GUARDIAN SIGNATURE FOR COMPETITORS UNDER 18

Under law, this helm or crew is my dependent, and I accept the statement. I confirm that my dependent is competent to take part and that I am responsible for my dependent throughout the event. During the time my dependent is afloat I will be in or around Dell Quay Sailing Club or I will inform the race officer in writing who is acting in *loco parentis* during my absence.

NAME *(block capitals)* Parent/Guardian (Helm)

SIGNATUREAge *(If 16 years old or under on the 6th June 2020)*

Please complete all sections in block capitals

Club: **Sail no:**

Class: **Rig:**.....

Helms Name:.....

Address :

.....

Post code:

Contact phone no:

Email:

Harbour dues: (£2 per weekend)

Office Use Only:

Entry Fee Paid: Harbour Fee Paid:

Entry Fee Paid: £

(Payable for all non Chichester/Langstone boats)