



2024 MYC Junior Race Team Registration

Sailor's Name: _____ Birth Date: _____

Address: _____ City: _____ State: _____ Zip: _____

Home Phone: _____ Grade Completed - June 2024: _____

Prior Sailing Experience: _____

Sailor's Shirt Size: _____

Mother's Name: _____

Day Phone: _____ Cell Phone: _____

Email Address: _____

Father's Name: _____

Day Phone: _____ Cell Phone: _____

Email Address: _____

Emergency Contact: _____ Relationship: _____ Phone: _____

Doctor/Clinic: _____ Phone: _____

To Register:

- For away regattas, parents are requested to help transport sailors and equipment.
- Complete registration and Liability Waiver & Emergency Medical Treatment form.
- Complete the Concussion Awareness Form.
- Complete the WMYSA Regatta Entry Form.(this form will be duplicated for each regatta)
- **Fee: \$450/racer.** (For additional information see the Junior Race Team Information page).
- Payment Options:
 - Personal Check or
 - MYC Charge Account (Fee's will be charged June 1)
- Submit completed forms and payment to:

***Muskegon Yacht Club
Attn: Kim Blum, Sailing School
3198 Edgewater Street
Muskegon, MI 49441***

Cell Phone: (616) 819-0302 Email: mycJuniorSailing@gmail.com

**Muskegon Junior Racing Program and Muskegon Junior Sailing Association
Liability Waiver and Emergency Treatment Authorization**

I/We the undersigned parent(s), or legal guardian of _____ (the child), a minor, hereby authorize the MYC Junior Racing Program and its officers and agents to take whatever actions they believe are warranted under the circumstances for the health and safety of the child, including the placing of the child in the care of a hospital and/or any licensed doctor, dentist or other health care professional. I/We further hereby authorize and consent to any x-ray, examination, anesthetic, surgical or other medical diagnosis, treatment or care (in or out of the hospital) of the child rendered by a licensed medical doctor, dentist or other health care professional, at my/our cost and expense. It is understood that this authorization is given in advance of any such diagnosis, treatment or care that may be provided to the child in order to give authority and power to render any such diagnosis, treatment or care which any such licensed doctor, dentist or other health care professional, in the exercise of his/her professional judgment, may deem advisable. It is understood that effort shall be made to contact the undersigned prior to rendering treatment to the patient, but that any of the above treatment or care may be provided to the child if the undersigned cannot be reached.

Initials _____

Release

The undersigned parent/guardian recognizes that an element of risk is involved in all water sports, including sailing. Therefore, to induce the MYC Junior Racing Program to accept his/her child into the MYC Junior Racing Program, the undersigned parent/guardian covenants and agrees to hold harmless and indemnify the MYC Junior Racing Program, the Muskegon Junior Sailing Association (MJSA), its officers, directors, employees, and agents from any and all claims, losses, damages, fees and liability growing out of or in any manner related to injury to a person or damage to any property arising out of or in anywise connected with the operation of the MYC Junior Racing Program or any activities on or the use of any facilities or equipment of the Muskegon Yacht Club, MYC Junior Racing Program or Muskegon Junior Sailing Association.

Initials _____

Photographic Release

I hereby acknowledge that my child may be photographed while participating in MYC Junior Racing Program activities and/or programs; I hereby unconditionally authorize MYC Junior Racing Program or the Muskegon Junior Sailing Association, at its sole discretion, to use any such photographs in brochures, flyers and any other advertising, promotional or educational materials.

Initials _____

Parent Agreement

*I/We understand that I/we are responsible for our child's or grandchild's behavior and conduct while engaging in MYC Junior Racing Program activities and will see to it that our child adheres to the program rules. I/We agree to assume the obligation for expenses of repair and/or replacement of program equipment that is **attributed to our child's reckless or irresponsible behavior** and the expense of medical care if our child is injured. I/We agree to make an appointment for a parent/instructor or director conference if requested.*

Initials _____

X _____

Signature of Father, Mother or Guardian

Date

Medical Information

Please check any items that apply. Use the space below or the back of the form for any additional details.

- | | | | |
|--------------------------|-----------------------|--------------------------|---------------------|
| <input type="checkbox"/> | Asthma | <input type="checkbox"/> | Heart Condition |
| <input type="checkbox"/> | Epilepsy/Seizures | <input type="checkbox"/> | Blood Disorder |
| <input type="checkbox"/> | Diabetes/Hypoglycemia | <input type="checkbox"/> | Learning Disability |
| <input type="checkbox"/> | Hearing Aids | <input type="checkbox"/> | Eyeglasses |
| | | <input type="checkbox"/> | Allergies _____ |

2024 MYC Junior Race Team Information

\$450 Race Team Fee includes the following:

- Unlimited tiller time during *AFTERNOON* sailing school hours. (1PM to 4PM)
 - Note there is no sailing school the weeks of July 1, 2024 and July 15, 2024
 - Sailing school does not begin until June 17, 2024. However, race team activities start in late April.
- Participation in four (4) WMYSA Regatta's:
 - June 28, 2024, at Muskegon Yacht Club.
 - July 12, 2024, at Spring Lake Yacht Club.
 - July 26, 2024, at White Lake Yacht Club.
 - August 9, 2024, at Macatawa Bay Yacht Club.
- Above the Crowd, Don Ulrich Cup at Muskegon Yacht Club. Tentative August 18, 2024
 - Sailors are asked to put boats away for winter storage following racing that day.
 - Awards ceremony for this regatta to follow cleanup
- ADDITIONAL TENTATIVE RACE TEAM EVENTS AND ACTIVITIES ON NEXT PAGE
- RACE TEAM MEETING, APRIL 20, 2024
- Boat charter for the **Opti "No Tears" Regatta** *for beginners* at the Saugatuck Yacht Club, July 19, 2024.
 - Sailors may need to provide secure transport of boats to/from Saugatuck Yacht Club.
- Boat charter for the **Butterfly Nationals Regatta** at the Glen Lake Yacht Club July 16-18, 2024.
 - Additional entry fees apply.
 - Sailor is responsible for their own sign up with Butterfly Nationals.
 - Sailor will need to secure transportation of boats to/from Glen Lake Yacht Club.
- Boat charter for the **WMYA "Westerns"** at the White Lake Yacht Club August 1-4, 2024.
 - Additional entry fees apply.
 - Sailor is responsible for their own sign up with WMYA.
 - Sailor may need to provide secure transport of boats to and from White Lake Yacht Club

Tentative race schedule on next page

The Following is a Tentative Race Team Schedule

(to be discussed at team meeting April 20, 2024)

Pre-Season:

- Team meeting: April 20, 2024, time TBD
- Work Bee: May 11 at 10 AM
- Practice: Saturdays at noon starting May 18 (no practice June 15)
- Regatta: Saturday June 8 at 10 AM or Sunday June 16 at 10 AM

Season:

- Practice:
 - Thursdays at 4 PM (June 20, June 27, July 11, July 18, July 25, August 1, August 8, August 15)
 - Friday at 2 PM (July 5)
- Optional Practice:
 - Fridays at 11 AM (June 21, August 2, August 16)
 - 1pm to 4pm during sailing school hours
- Races:
 - Saturdays at 10 AM (June 22, June 29, July 6, August 3)
 - Sundays at noon (July 7, July 28, August 11)
 - Possible team Farr 395 races (May 26, July 6, August 17, September 7)
- Possible Fall Season of club racing.

2024 WMYSA REGATTA ENTRY FORM

THIS FORM MUST BE SIGNED BY A LEGAL GUARDIAN UNLESS THE SAILOR IS 18 YEARS OLD

(circle the fleet you will sail in)

OPTI GREEN

OPTI RWB

BUTTERFLY

LASER 4.7 (ILCA 4)

LASER RADIAL (ILCA 6)

LASER FULL (ILCA 7)

CLUB 420 JIB & MAIN

CLUB 420 SPINNAKER

ATTENTION COACHES:

Please make sure you do not have any identical sail numbers among your sailors! Any differentiation must be done with more than just black electrical tape!

SAIL NUMBER _____

(please include any other unique traits such as sail letters, sail color or hull color)

SAILOR'S NAME _____

AGE _____

ADDRESS _____

CITY _____

STATE _____

ZIP _____

PHONE NUMBER _____

CREW NAME IF APPLICABLE _____

SAILING CLUB _____

EMERGENCY CONTACT _____

EMERGENCY PHONE # _____

(please make sure you have a signed Concussion Form on file with your home sailing club or program)

DISCLAIMER OF LIABILITY.

Competitors participate in the regatta at their own risk.

Parents/guardians are responsible for the safety of the sailor who is less than 18 years of age. It is the responsibility solely of the parent(s) of the sailor to decide if the sailor should sail in the weather and sea conditions that might arise during the event. Parents not personally attending any part of the event must ensure that another adult is authorized and designated to make these decisions for their sailor.

The organizing authority and all parties involved with the organization of the event disclaim any and every responsibility whatsoever for loss, damage, injury, inconvenience, or death sustained in conjunction with or prior to, during, or after the regatta that might occur to persons and goods, both ashore and at sea, as a consequence of participation in the races covered by these sailing instructions.

Signature of parent or guardian _____

date _____