

# Wihau Shield & Secretaries Cup

29<sup>th</sup> and 30<sup>th</sup> April 2017

At

**Tauranga Yacht and Power Boat Club (Inc)**

Organising Authority:

TAURANGA YACHT AND POWER BOAT CLUB (Inc)

TAURANGA YACHT AND POWER BOAT CLUB(Inc)  
PO Box 14352,  
Tauranga 3143.

Class
Sail Number
Hull Colour
Boat Name

<b>Helmsperson</b>	
First Name	
Surname	
Gender <b>Male / Female</b>	
Yacht Club	
Address	
Email	
Phone - Work	Phone – Home
Phone - Mobile	Fax

I agree to be bound by the Racing Rules of Sailing and all other rules that govern this event. I understand that yacht racing has inherent risks and dangers that are beyond the control of the organizing authority. I understand that neither the organising authority and its officers, members and servants nor other persons assisting with the conduct of the regatta accept any responsibility in respect of any injury or loss to person or property that may be sustained by reason of participation in the regatta or howsoever arising in connection with the regatta.

I agree to the use of my photograph(s) and other relevant information in any event publicity and in the ongoing promotion of New Zealand yachting. I agree to the Organising Authority and Yachting New Zealand holding the above information for the general administration and well-being of the sport, and for them to retain, use and disclose the information to affiliated organisations and any other persons or organisations that Yachting New Zealand believes will further the interests and objectives of Yachting New Zealand. I acknowledge my right to access to and correction of this information. The consent is given in accordance with the Privacy Act 1993.

<b>Helmsperson's Signature</b>	<b>Crews Signature</b>
Date	Date
<b>Parent/Guardian's Signature (if sailor under 18 years old)</b>	<b>Parent/Guardian's Signature (if sailor under 18 years old)</b>
Date	Date

<b>Enclosures (if stated as required to be presented in Notice of Race)</b>				
Entry Fee	Proof of Club Membership	Proof of Class Assn Membership	Proof of Date of Birth	
	<input type="checkbox"/>		<input type="checkbox"/>	

<b>Office Use</b>			
Entry Fee Paid	Cash / Cheque / Eftpos	Date	Comment