



The San Francisco Yacht Club Race Entry

Optimist Regatta

Fee Paid: \$

Division _____ Sail Number _____

Skipper _____ Club _____

Address _____ Birth Date _____

Phone _____

Waiver: In consideration of my child participating in the San Francisco Yacht Club Youth Dinghy Regatta, I agree to accept risks of injury to my child, to hold San Francisco Yacht Club, its officers, Directors, employees and members harmless from any claims of any nature whatsoever, arising out of or in any way connected with the operations of the regatta whether on land, or afloat, or traveling to or from the regatta location.

Parent/Guardian

Signature _____ Date _____
