

Nacra 20 North American Championships

November 14th through 17th, 2005

Clearwater ,Florida

Official Registration

Skipper's Name	Crew's Name
Address	Address
City/State/Zip	City/State/Zip
Phone	Phone
Email	Email
Emergency Contact	Emergency Contact
T-Shirt Size	T-Shirt Size
Local Accommodations	
Boat Model	Sail Number
Hull Number	Insurance Co.*

***(A copy of your boat liability insurance policy must be submitted with the application. Prior to the start of the race a current copy must be presented to race officials upon registration and valid for the duration of the race.)**

THIS IS A RELEASE AND INDEMNITY AGREEMENT: WAIVER: I Certify that I have the necessary experience, skill and equipment to safely compete in the Nacra N.A. Championships and I am fully aware of the weather and sea conditions that may exist during the race. The decision to start or continue sailing in the Nacra N.A. Championships is mine alone, and I accept full responsibility for my decision. I acknowledge that I am competing in the Nacra N.A. Championships at my own risk and agree to waive all claims that might arise against International Nacra Class Association, Performance Catamarans, its sponsors, their servants, agents or employees, as well as their officers, directors, committeemen or members. I agree that the aforementioned are not liable whatsoever for any accident or injury to myself, my boat, my crew or any guest on my boat. I represent that my boat is seaworthy and complies with the safety rules of the United States Coast Guard. I certify that I have liability insurance for my boat and that I am able to right my boat without assistance.

Signature Skipper	Date	Signature Crew	Date
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Entry fee enclosed (\$275.00 or \$315 after November 7th 2005	\$ _____
Nacra Class Membership is Free for Registered Skippers	\$ Paid ___
Extra T-Shirts (M L XL XXL) @ \$15. - List sizes below	\$ _____
Total	\$ _____

Make check payable to Clearwater Community Sailing Center
(write Nacra 20 Champ on the memo section), and mail a copy of this Registration Form to
Clearwater Community SC • 1001 Gulf Blvd • Clearwater, FL 33767

Paid: _____ Check # _____ Date: _____ Initials: _____