



ENTRY FORM

National A Class Regatta, Maccagno, 14 – 15 June 2014

To The Organising Committee:

Unione Velica Maccagno

Lungolago G. Girardi,

21010 Maccagno VA Italy

Surname:		Name:		Gender	
				<input type="checkbox"/> M	<input type="checkbox"/> F
Date of Birth:		Nationality		Address:	
Postal Code:	City:	Country:	ph.:	Email:	
Sail Number			Boat Name		
n° tessera FIV:		A Class Association Nr.			
Sailing Club Membership:		Club Code:		National Sail Federation	

I agree to be bound by the racing Rules of Sail ISAF 2013/2018, and all other rules that govern this event. I declare that I am fully responsible for the quality, maintenance and safety of equipment of my boat. I understand that neither the organising authority nor its officers, member or any person assisting with the regatta, accept any responsibility in respect of any injury, loss to person or property that may be sustained by reason of participation in the regatta or howsoever arising in connection with regatta. I am aware of the Rules 4 ISAF "The responsibility for a boat's decision to participate in a race or continue racing is hers alone"

I have been informed, as per art. 13 of D.Lgs n. 196/2003, that all my personal data will be kept and processed with IT technology for the purpose of the general administration and interest of the above event.

Date

Helmsperson's Signature.