

## **WAIVER and HEALTH TREATMENT FORM**

### **WAIVER OF LIABILITY, MEASUREMENT, SAFETY CERTIFICATION and USE OF LIKENESS**

We recognize and understand that participation in this Regatta is voluntary and that the competitor incurs risk by participating including the possibility of injury or death. In consideration of the acceptance of the competitor's entry, I the parent, waive, both for myself and for my child, any and all claims, charges, losses and liabilities including those caused by negligence or relating to the results of the event, qualification for the 2010 New Jersey State Optimist Championship, or invitations to any team sponsored by the USODA, against the Brant Beach Yacht Club and the USODA and their respective officers, trustees, contractors, employees, members, and volunteers, that may arise from or in any way be in connection with the activities of the Regatta. We are aware that the activities of the competitor may involve maneuvering a boat on water in potentially hazardous conditions which may include among other things, cold water temperatures, strong winds, high waves, lightening, sudden and unexpected immersion in deep waters and collisions with other water craft or stationary objects such as docks, pilings and buoys. I, the parent, understand that I am responsible for the actions of my child while he or she is participating in the Regatta both on land and at sea and that I am solely responsible for whether or not my child participates or sails each day in the weather conditions. We also agree that my child is bound by the Racing Rules of Sailing, the rules of the USODA and the IODA, the Notice of Race, and the Sailing Instructions.

We certify that no equipment bearing a USODA measurement sticker or stamp has been altered since the sticker or stamp was affixed, that the boat in which the competitor will compete is safe and seaworthy, and that the boat and competitor will carry all safety equipment and features required by IODA, USODA and the US Coast Guard. We grant to the USODA and the Brant Beach Yacht Club the right to use my child's name, age and photograph, without compensation, in any press release, web site posting, advertisement, brochure or other medium intended to publicize this regatta or the USODA.

Signed (parent or guardian): \_\_\_\_\_ Date: \_\_\_\_\_

Competitor 's Signature: \_\_\_\_\_

### **AUTHORIZATION FOR TREATMENT**

In the event my child, \_\_\_\_\_, is injured or ill while attending the 2010 New Jersey State Optimist Championship at the Brant Beach Yacht Club, I hereby give my permission for the administration of all reasonable health care treatment. I expressly authorize any officer, member or volunteer from either the Brant Beach Yacht Club or the USODA to consent to such health care treatment. Such treatment may include but is not limited to x-ray examination, dental, anesthesia, medical or surgical diagnosis or treatment. I understand that this authorization is given in advance of any specific diagnosis or treatment or hospital care. It is given to provide the authority and power to the health care professionals to exercise their best professional judgment. It is understood that efforts will be made to contact me prior to providing such treatment but I also understand that the treatment may occur if I cannot be contacted. I also agree to pay the reasonable cost of any such health care attention or treatment and to reimburse the Brant Beach Yacht Club, the USODA, or any person who incurs expenses for this health care treatment. I certify that medical information provided as part Official Entry Form is as complete and accurate to the best of my ability.

\_\_\_\_\_  
(parent or guardian signature) (date) \_\_\_\_\_

Mail to: Brant Beach Yacht Club – 2010 NJ Optimist States, PO Box 208, Shipbottom, NJ 08008 before August 3. Bring to check-in after after August 3. 2010