



**HOSPICE SOUTHEASTERN CONNECTICUT
 REGATTA SERIES 2008**
Niantic Bay Yacht Club Wednesday Night Hospice Race
July 16, 2008

REGISTRATION

Boat Name _____

Owner's Name _____ Co-Owner _____

Address _____

City _____ State _____ Zip _____

Day Phone _____ Evening Phone _____

Cell Phone _____ Email _____

Yacht Club _____

BOAT AND CLASS INFORMATION

Boat Design & LOA _____

Sail Number _____ Hull Number _____ PHRF Rating _____

Spinnaker _____ Non-Spinnaker _____ IRC _____

Number of Crew _____ PHRF/LIS Certificate Yes: No:

PAYMENT INFORMATION

Regatta Entry Fee:		
PHRF	\$100	(includes 1 t-shirt)
420	\$ 35	(includes 2 t-shirts)
Optimist	\$ 25	(includes 1 t-shirt)

Entry Fee:	\$ _____
Other Donation:	\$ _____
TOTAL ENCLOSED	\$ _____

Please print this form, fill out and mail with check to: **OR**

Niantic Bay Yacht Club
 8 Shore Road
 Niantic, CT 06357
 Fax to: (860) 848-6898

Register and fundraise on-line by visiting
www.hospicesect.org or www.mudheads.org
 Follow the link to FirstGiving.com.
 Direct Questions to Nancy Healy – njhealy@juno.com

Waiver: To the fullest extent allowed by law, I hereby waive, for myself and anyone acting on my behalf, any rights I may have or may acquire in the future to sue the race organizers, the Niantic Bay Yacht Club or Hospice of Southeastern Connecticut, including their respective employees, volunteers, agents and servants ("Releasees"), with respect to personal injury or property damage I may suffer as a result of my participation in this racing event, and hereby release the Releasees of any liability for such injury or damage. (Parent must sign if sailor is under 18.)

Signature _____ Date _____