



LaSalle Mariners Yacht Club

2nd Annual Women's Race

June 28, 2025

REGISTRATION

Class / Make of Boat: _____
Boat Name: _____
Sail Number: _____
Largest Headsail (% Overlap): _____
Owner / Skipper: _____
Phone Number: _____ Email: _____
Insurance Company: _____
Policy Number: _____
Club Affiliation: _____

Division Competing In:

All Women

(male boat owners may be aboard)

Rating: _____

☐

Mixed

(up to 50% men with a woman at the helm)

Rating: _____

☐

All Classes: Entry Fee: CA \$35.00

Agreement to Assume Risks and Hold Harmless

In Consideration of being permitted to enter this race, all contestants, crew members and guests onboard voluntarily assume the risk of participating in this race as well as pre and post race activities.

Please initial here _____

I agree / certify:

- (a) to hold harmless against loss, the organization and personnel conducting this race;
- (b) to be bound by the Racing Rules of Sailing and by other rules that govern this event;
- (c) the boat is fully insured;
- (d) I have read Rule 3 of the Racing Rules of Sailing - Decision to Race;
- (e) All contestants, crew and guests aboard the boat have read, understood, and signed off on all Concussion Policy Documents.

Signature: _____

Date: _____

For entry by email, please send: Completed and signed entry form
Copy of the boat's current PHRF rating certificate
Proof of insurance

to **lmycracing@gmail.com**

Payments may be e-transferred to: **lmyctreasurer@gmail.com**

Entry may also be mailed or dropped off to the race director's box at LMYC.

Cheques should be made out to LaSalle Mariners Yacht Club, and deposited into the Treasurer's box at LMYC.

For US boats competing, please reach out to **lmycracing@gmail.com** for payment options.

LaSalle Mariners Yacht Club, 2640 Front Road, LaSalle Ontario N9J 2N1