



International 29er European Championship
Quiberon, France
20-27 August, 2017

CONSENT AND DECLARATION FORM

[This form may be completed on screen and printed]

Sail Number:

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Helm

Crew

Competitors(s):

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Sailor Declarations: I confirm the accuracy of the information contained in the sailor's Entry Form. I accept the Disclaimer of Liability in the Notice of Race that excludes the right to claim compensation in certain circumstances. During the event the boat sailed will have a valid and current third party insurance of at least €1.5000.00 or the equivalent in another currency. I confirm that I am competent to take part.

I consent to my participating in drug testing procedures and, if asked, providing a urine sample under observation for analysis at an accredited laboratory. I note that photographs may be taken during the event, both on and off the water, and I consent to these being published in Class publications and/or on the Class/Club website and those of any authorised photographers.

Medical Form attached

YES/NO*

YES/NO*

* Attach any medical issues the organizers should be aware in an emergency for reference, in a separate document. Medical forms are confidential and will be shredded at the completion of the event.

Name of Emergency contact

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Home address

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Home phone no.

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Mobile no.

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Signature

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This Form should be fully completed, signed and returned to:

orgaete2017@cdv56.fr

prior to the regatta or presented at registration on-site.