

2009 EUROCUP 29er
 May 1st - 3rd, 2009
 DOBRZYŃSKI KLUB ŻEGLARSKI
 Dobrzyń nad Wisłą, Poland

PARENT/GUARDIAN CONSENT AND DECLARATION FORM

[This form may be completed on screen and printed]

Country code		
Sail Number		

Helm

Crew

Competitors(s):		
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Parent/guardian Declarations: (Required for all helms and crews who are under 18 years of age)
 Under law, the above competitor is my dependent. 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 by my dependent will have a valid and current third party insurance of at least 1.000.000 EUR or the equivalent in another currency. I confirm that my dependent is competent to take part.

I consent to my dependent 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.

During the event (tick one box):

- I will be responsible for my dependent throughout the event, and during the time my dependent is afloat I will be available at the event venue.
- I appoint the person named below, who has agreed to act in loco parents. He/she will be responsible for my dependent throughout the event. During the time my dependent is afloat he/she will be available at the event venue.

Medical Form attached	YES/NO*	YES/NO*
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*Delete as applicable

Name of Parent/Guardian		
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Home address		
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Home phone no.		
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Mobile no.		
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Person acting in loco parents (if applicable)		
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Mobile no.		
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Signature of parent/guardian		
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This Form shall be fully completed, signed and returned together with the Entry Form