#### C:\Users\Fred\Downloads\Brasileiro-2015.jpg

#### ENTRY FORM

**LIABILITY:** All those entering or taking part in this Regatta do so at their own risk and responsibility. ISAF-IRSA, IOM ICA, ABVRC, BRA NCA, Clube dos Jangadeiros, regatta staff, and or any other parties involved in the organization of this event disclaim any and all responsibility whatsoever for loss, damage, injury or inconvenience that might occur to persons and goods, both ashore and on the water as a consequence of entering or participating in the event covered by this Notice of Race.

At all times the responsibility for the safety of their boat and themselves including the decision to participate or continue shall rest with the competitors. By entering this event, it is deemed that you accept these conditions. Competitors are advised to ensure that they have adequate insurance that provides coverage for public liability and their possible injury in the Country and County of this event.

**CONDUCT: Poor competitor behavior can reflect negatively on the sport, *and all competitors are advised that* *their actions will be under scrutiny by race officials*. In the event race officials witness any behavior which they deem to be a breach of good manners or sportsmanship, or which may bring the sport into disrepute, the Principal Race Officer assisted by race officials will protest the party (ies) in accordance with RRS 2 or 69.1.**

**The PRO, all race officials and observers have been directed to record any incidents which will be dealt with to the full extent available to the Protest Committee. Penalties available to the Protest Committee include exclusion from the race in question or subsequent races, exclusion from the regatta, or other action within the Committee’s jurisdiction.**

**Name: MYA #:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Address: Cell #:** (\_\_\_\_\_) \_\_\_\_\_\_\_-\_\_\_\_\_\_\_\_\_

**City: State: Zip:**

##### Phone: Email Address:

##### Sail #: Country: Hull #:

**Hull Design: Hull Color:**

**Channel: Primary Secondary Alternate**

**Emergency phone #:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Emergency contact name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

By signing this entry form I agree to all the terms and conditions set forth in the Notice of Race above:

**Signature:**  **Date:**