

Makani Kai



**Makani Kai Yacht Club
2018 HYSA # 8
Race Registration Form**

Class: _____ Sail Number: _____

Hull Color: _____

Skipper: _____ Age: _____

Address: _____ Home Phone: _____

Health Plan: _____ Doctor: _____

Emergency Contact: _____ Phone: _____

I agree to be bound by the Racing Rules of Sailing (RRS), the prescriptions of US Sailing, the Hawaii Youth Sailing Association (HYSA), and the sailing instructions.

I agree to hold harmless, the State of Hawaii, Makani Kai Yacht Club, its officers and members, AOA Makani Kai Marina, Inc. its officers, directors, manager, and owners; the Race Committee personnel and any persons assisting in the administration of the Makani Kai Sail Boat Races of water functions responsible for any liability whatsoever; for accident to myself, my crew, my guest, or my boat. I certify that I will carry the required equipment prescribed by the United States Coast Guard and Hawaii Yacht Racing Association.

Skippers Signature

Date

Parent of Guardian if Skipper is under 16 years of age

Fees: _____ \$ 10.00 Member of U. S. Sailing

_____ \$ 12.00 Non Member of U. S. Sailing