OFF SOUNDINGS CLUB
ENTRY FORM

Before you complete this form, please consider entering the information online at www.offsoundings.org. If you are unable to do so and submit this form, the information will be entered for you. Please be aware that the online entry form contains more information and should be your source of information before, during and after racing.

Primary Master: First Name ___________________ Last Name ___________________
Address: Street __________________________ Phone (cell) _________________________
________________________________________ Phone (Home) _________________________
City ____________________________ State ______ Zip code _______________________ 

Are you an Off Soundings Member? Yes__________ No __________

Email Address: __________________________ Yacht Club (other than OSC) _______________

Secondary Master: First Name ___________________ Last Name ___________________
(Please note that a secondary skipper must be an OSC member or invited guest)

Boat Name: ____________________________ Sail# ___________________
Design: ____________________________ Length (LOA) ___________________

Check one: Spinnaker ______ Non-Spinnaker ______ Multihull ______

Handicap Certificate Check one: PHRF______ OSC _______ NEMA_______

List the PHRF region that issued your Handicap Cert. _________________ Rating: ________ Year ______

All enquiries related to your PHRF Certificate should be directed to Paul von Maffei-OSC Handicapper, at pvm461@yahoo.com or call 203-314-7551.

Series Entry Fees: Boat $70.00
Adult Party tickets ____ x $15.00 = $_________
Minor Party Tickets____ x $ 1.00 = $_________
Total $_________

Please make checks payable to Off Soundings Club and mail your check and this form to Anne Wilkinson, Race Secretary, Off Soundings Club, 10 Harbor Court, Noank, CT 06340 to arrive no later than the entry deadline outlined at www.offsoundings.org.

Any questions can be directed to Anne Wilkinson at raceosc@gmail.com or 860.460.2229.

I certify as Master (s) that the above information is correct and that I have read, understood and agree with the Off Soundings Club “Certification and Waiver” shown on page 2 of this Entry Form.

Primary Master ____________________________ Date __________
Secondary Master ____________________________ Date __________
CAPTAIN’S RESPONSIBILITY

The Off Soundings Club frequently races in severe weather conditions. The safety of the boat and her crew and the decision to race is the sole and inescapable responsibility of the captain, who must ensure that the boat is sound, seaworthy, and manned by an experienced crew who are physically fit. The captain must ensure that all safety equipment is properly maintained and stowed and that the crew knows where it is kept and how it is to be used. It is also the responsibility of the captain to prevent underage drinking by his/her crew members at Off Soundings functions.

The organizers bear no responsibility for accidents, damage, or injuries to boats or their personnel arising from any cause during these races or related activities.

CERTIFICATION AND WAIVER

I hereby certify that I have read and agree to the above titled CAPTAIN’S RESPONSIBILITY.

I hereby agree that neither I nor any of my crew shall hold either the Off Soundings Club or any of its officers, governors, or committee members responsible for accidents, damage, or injuries during the races or related activities. No crew member will be aboard my boat who has not consented to this waiver on his or her behalf.

Nothing herein shall waive any claim which I or my crew members may have against any officer or member of the Off Soundings Club acting in his or her individual capacity as a participant in the races as a captain or crew member of any boat competing in these races.

You may wish to disclose this Certificate and Waiver to your insurer.

RULES AND REGULATIONS

I agree to be bound by the Racing Rules of Sailing and any other rules and regulations established for this Race Series by the Off Soundings Club, which s the Organizing Authority.