ISSA HIGH SCHOOL TEAM RACING REGATTA PARTICIPANT REGISTRATION, WAIVERS AND MEDICAL RELEASE

Bay Access / Lakewood Yacht Club Seabrook, TX

BAKER TROPHY May 20-22, 2022

Sailor's Full Name:			DOB:	
School:				
List all known allergies:				
Medical Challenges:				
Current Medications:				
is involved in athletic participation. to reduce these risks, but further involved, and give my consent for I am aware that ISSA, Bay Access coverage will be provided by each I further release and hold harmless	I recognize that ISSA, B recognize that their efforthe above named studer and Lakewood Yacht Cluparticipant's parent/guar ISSA, Bay Access and La	by acknowledge that the risk of injury, any Access, Lakewood Yacht Club, and orts cannot and will not eliminate all set to participate in all activities associated to not carry medical insurance for straight. Evidence of such coverage must kewood Yacht Club, their Officers, Direct and all liability arising from the above-reserved.	d their representatives made their representatives made their risks. I am aware of ed with the sailing event. The sailing event and that medical is the provided above. The sailing events are the sailing event.	ake efforts of the risks insurance employees,
Sailor (if over 18)			Date	
If Sailor is UNDER the age of 18	, Sailor's parents / lega	I guardians need to execute this wai	iver.	
Father/Legal Guardian	Date	Mother/Legal Guardian	Date	
Print Name		Print Name		
Address		Address		
City	State Zip	City	State Zip	
Cell Phone		Cell Phone		

COVID-19 PANDEMIC CONSENT FORM

Assumption of the Risk and Waiver of Liability Relating to Coronavirus/COVID-19

The novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization. COVID-19 is extremely contagious and is believed to spread mainly from person-to person contact. As a result, federal, state, and local governments and federal and state health agencies recommend social distancing and have, in many locations, prohibited the congregation of groups of people.

Bay Access Sailing/Lakewood Yacht Club has put in place preventative measures to reduce the spread of COVID-19; however, Bay Access Sailing/Lakewood Yacht Club cannot guarantee that you or your child(ren) will not become infected with COVID-19. Further, attending Bay Access Sailing/Lakewood Yacht Club events could increase your risk and your child(ren)'s risk of contracting COVID-19.

I confirm that I am not presenting any of the following symptoms of COVID-19 listed here:

Fever, Shortness of Breath, Loss of Sense of Taste or Smell, Dry Cough, Runny Nose, Sore Throat	
Initial:	
By signing this agreement, I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that my child and I may be exposed to or infected by COVID-19 by attending participating in the Bay Access Sailing / Lakewood Yacht sailing event and that such exposure or infection may result in personal injury, illness, permanent disability, and death. I under that the risk of becoming exposed to or infected by COVID-19 at Lakewood Yacht Club may result from the actions, omission negligence of myself and others, including, but not limited to, Bay Access/Lakewood Yacht Club employees, volunteers program participants and their families.	t Club rstand ons, o
I voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury to my child(ren) or recording, but not limited to, personal injury, disability, and death), illness, damage, loss, claim, liability, or expense, of any that I or my child(ren) may experience or incur in connection with my child(ren)'s attendance and participation in the Bay A High School Sailing practices and programs ("Claims"). On my behalf, and on behalf of my children, I hereby release, cover not to sue, discharge, and hold harmless Bay Access Sailing/Lakewood Yacht Club, its employees, agents, representative independent contractors, of and from the Claims, including all liabilities, claims, actions, damages, costs or expenses of any arising out of or relating thereto. I understand and agree that this release includes any Claims based on the actions, omission negligence of Bay Access/Lakewood Yacht Club, its employees, agents, and representatives, whether a COVID-19 inforecurs before, during, or after participation in the Bay Access Sailing / Lakewood Yacht Club Sailing event.	kind ccess enant s and y kind ons, or
Signature of Sailor (18 years or older) or Parent/Guardian	
Printed Name of Sailor	
Printed Name of Parent/Guardian	
PhoneEmail	

PARTICIPANT WAIVER AND MEDICAL RELEASE

1.	As parent or legal guardian of (the "Participant"), I recognize that sailing is activity that has an inherent risk of damage and injury associated with it, and hereby acknowledge and agree that the min participating in the ISSA / SEISA / Bay Access/Lakewood Yacht Club sailing event and/or chartering a boat from Bay Access ("Program") entirely at his or her own risk with my full understanding of such risk.	no
2.	For and on behalf of the Participant and myself, I acknowledge and agree that ISSA, SEISA, Lakewood Yacht Club, Bay Acce nor their respective members, officers, board of directors, staff or representatives will be responsible for:	SS
	(a) any damage to the chartered boat or my or Participant's property, or(b) any personal injury, including death,	
	sustained as a result of Participant's participation in this Program/Event, regardless of the fact that such damage may, in wh or in part, be due to the negligence of the ISSA, SEISA, Lakewood Yacht Club, Bay Access, or their respective member officers, board of directors, staff or representatives.	
3.	For and on behalf of Participant and myself, to the fullest extent permitted by law, I hereby WAIVE any rights either of us members to sue the Program Organizers (including ISSA, SEISA, Lakewood Yacht Club, Bay Access, and/or their respect members, officers, board of directors, staff or representatives) with respect to personal injury or property damage suffered Participant as a result of his or her participation in the Event/Program and hereby RELEASE the Event/Program Organizers for any liability for such injury or damage to the fullest extent permitted by law whether caused in whole or in part by negligence.	by on
4.	I understand this document has important legal consequences and have had the opportunity to consult with such legal and other advisors as I deem appropriate before signing.	he
Par	rent or Legal Guardian's Signature:Date:	
Par	rticipant's Name:	
Dat	te of Birth:	
Add	dress:	
Par	rent/Legal Guardian Printed Name:Phone:Phone:	
Ado	dress (if different):	
Add	ditional Emergency ContactPhone:	