Notice of Race

NWISA North Regional Regatta

Bellingham, Washington October 6th, 2018

1 HOST

1.1. This regatta is hosted by the Whatcom Community Sailing and WWU Lakewood.

2. RULES

- 2.1. The regatta will be governed by the current Racing Rules of Sailing, as modified by the prescriptions of US Sailing, the ISSA procedural rules, the NWISA District Rules, this Notice of Race, and the Sailing Instructions.
- 2.2. The US Sailing Prescriptions to rules 63.2 and 63.4 will not be in effect.

3. ELIGIBILITY

- 3.1. This is an 'Open Regatta' as described in the NWISA District Rules. 'Active' and 'Mixed' teams may attend. Team shall be registered with NWISA and ISSA including online registration, team fees paid, and damage deposit paid.
- 3.2. Competing teams shall be members of ISSA and meet ISSA eligibility rules as prescribed in the Procedural Rules, however;
- 3.3. Multiple active teams per school and mixed teams are allowed, limited by boat availability. Teams shall be comprised of a minimum of 4 sailors.
- 3.4. Teams shall be from the **NORTH** region as designated on the NWISA website: https://nwisa.hssailing.org/about/regions. A SOUTH regional regatta will be happening simultaneously. Schools wishing to compete but are not sure which region they belong should contact Scott Wilson, scottjwilson@gmail.com, 360-303-1759.

4. FORMAT

4.1. The regatta will consist of an A and B division and will be sailed with one division on the water at a time.

5. ENTRY FEE

5.1. This Regatta is free. No food or drinks will be provided.

6. LAUNCHING AREA:

- 6.1. Teams bringing boats are to launch at Lakewood.
- 6.2. Fire lane cannot be blocked during unloading or loading of boats it must be kept open!

7. BOATS

- 7.1. Boat allocations will be determined based on district supplemental rules boat allocation procedures.
- 7.2. The Regatta will be sailed in FJs.

8. REGISTRATION

- 8.1. Registration opens 9/24/18 at 11:00am. Eligible schools shall submit their intent to participate, total number of sailors attending and number of boats they can bring to the NWISA registration spreadsheet no later than 10/1/18 @ 10:00pm. Additional registrations are allowed after this time, but teams may be turned away if boats are unavailable. There will be no morning of registration, but teams will be required to check in at the registration table.
- 8.2. Please print, and fill out our Medical/Liability waivers for each participating sailor and turn in during check-in with regatta fees.

9. SCHEDULE

Saturday, October 6th, 2018

0830 Rigging and launching.

0900-1000 Team Check-In 1000 Skippers Meeting 1030 First Warning

No warning after this time

Any changes to the schedule will be posted on the Official Notice Board.

10. CONTACT

10.1. Please contact Scott Wilson if you have any questions concerning racing or logistics, at: whatcomsailing@gmail.com, cell/text: 360-303-1759.



CHILD'S INFORMATION AND PARENTAL AGREEMENT

Lakewood Program: H	igh school regatta @ La	kewood 10/6	
Child's Name:		DOB:	
Address:			
Cell Phone:			
Emergency Contact Name		Relationship	
Phone: Cell		Home	
Physician's Name		Phone	
Medical Insurance Inform	ation		
Insurance Company Name		Policy Number	
Name of Policy Ho	lder		
Parental Agreement			
Such activities have hazard failure, strenuous physical availability of medical assis Program may involve risk of	ds including, but not limited to exertion, bodily fatigue, the r stance and the possible reckl of injury to my child and, to the	not limited to, boating and sailing and other watersport activities. o, drowning, unpredictable weather, water hazards, equipment eckless or negligent operation of other watercraft, limited ess or negligent conduct of other individuals. I recognize that the se extent permitted by law, I agree to accept any and all risks lamage or loss, minor bodily injury, severe bodily injury, illness and	
are welcome to attend your requirements for the children	th programs affiliated with the en and their parent or guardia	Bringing Children to Western Policy. I understand that children to University in accordance with each program's rules and other an. I also understand that Western is not responsible or liable for any Il misconduct of the University, its officers, agents, volunteers, or	
		o care for children who are unable to continue to participate in the readily accessible to pick up my child immediately when notified by	
for my child. If I am unable	to be contacted in event of	cy may develop which necessitates the need for medical treatmen such emergency, I hereby authorize the University and its officers, any necessary emergency medical treatment.	
I have read and understa	nd this agreement.		
Name of Parent/Guardian	of Child Listed Above (please	e print)	
Signature of Parent/Guardi	an	 Date	

