



The Burke Thomas Trophy

NWISA Singlehanded Championships

9/29-30

At CGRA Hosted by Willamette Sailing Club
Cascade Locks, Oregon



NOTICE OF RACE

AMENDED 9-25

1. RULES:

- 1.1. The regatta will be governed by the Racing Rules of Sailing for 2017-2020, the prescriptions of US SAILING, the ISSA Procedural Rules, the NWISA District Rules, this Notice of Race, and the Sailing Instructions.
- 1.2. The US Sailing prescriptions to rule 60, 63.2 and 63.4 are deleted and will not apply.
- 1.3. Under rule 70.5(a), the right of appeal is denied.

2. ELIGIBILITY:

- 2.1. Each sailor must be the member of a school which is registered with the ISSA. This is a district championship, which means all competitors must be in grades 9-12.
- 2.2. There will be two fleets. Laser and Laser Radial. Sailors may self-select their preferred fleet, but shall not change fleets once racing begins.
- 2.3. This is a qualifying event for the Cressy Singlehanded National Championship. The top sailor in each fleet will qualify.
- 2.4. Teams shall be accompanied by a designated adult team leader, who may be an advisor, coach or parent recognized by the school.

3. ENTRY AND ENTRY FEE:

- 3.1. Eligible schools shall register through the NWISA website link. Registration is on a first come, first serve basis if berths are limited. Registration opens 9/17 (two Mondays before) at 1100.
- 3.2. Registration closes 9/24 (Monday before) at 2200. Additional registrations are allowed after this time, but teams may be turned away if event capacity is reached.
- 3.3. Teams unable to compete once registration closes, shall notify the regatta chair as soon as possible.
- 3.4. Each competitor must have a signed EVENT WAIVER on file, this can be found attached below.
- 3.5. An entry fee of \$20.00 payable to: "Willamette Sailing Club" per sailor will be collected at check in (programs bringing multiple teams must pay per team).
- ~~3.6. Each competing program must have a damage deposit on file with NWISA per District rule 7.3.~~

4. BOATS AND FORMAT:

- 4.1. Competitors shall supply their own Laser or Laser Radial.
- 4.2. Class rules shall be observed and enforced by the competitors. Class approved equipment shall be used. However, club sails, spars, blades, and hardware may be used if they are of the same dimensions, material, and construction, AND offer no advantage over similar class approved equipment.

5. SCHEDULE:

Saturday, September 29

Sunday, September 30

1000	Registration	0900	Suggested Report Time
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1045	Mandatory Competitor's Meeting	1000	First Warning
1100	Registration Ends	1500	No Races Started after this time
1200	First Warning	1530	Results and Awards

Any changes to the schedule will be posted on the Official Notice Board located on the West side of the CGRA building.

6. RACING AREA:

All races will be sailed on the Columbia River, just east (up river) of the beach/ boat launch at CGRA.

7. COURSES:

Short collegiate style races in accordance with ISSA Procedural Rules.

8. SCORING:

The regatta will be scored in accordance with ISSA Procedural Rules.

9. HOUSING: **NO HOUSING IS PROVIDED.**

~~9.1. WSC may arrange housing teams with local families upon request Friday and/or Saturday night.~~

~~9.2. Contact the regatta chair or note as such on the registration sheet no later than 9/17 (Monday before) at 2200. Housing is not guaranteed.~~

10. TRAVEL AND TRANSPORTATION:

Teams are responsible for their own transportation. The address of the regatta site is: Marine Park, Cascade Locks, OR 97014.

11. COACHING:

11.1. Team leaders, chaperones, coaches, parents, advisors and other support personnel may go afloat in the designated portion of the sailing area from Saturday morning to the end of racing Sunday.

11.2. Competitors may receive coaching including instructions, assistance, equipment or sustenance either on shore, or on water, but only before, after, or in-between racing. Unless safety assistance is required, in which case assistance may be provided.

11.3. Coaches will have to supply their own coach boats.

12. CONDUCT:

12.1. No contestant shall use, either on or off the water, alcoholic beverages (beer, wine, or distilled spirits, each as defined in Chapter 51 of the US Internal Revenue Code and intended for beverage use), or marijuana, cocaine, or any other controlled substance (as defined in 21 US Code 802), the possession of which, by that contestant is unlawful under 21 US Code 841.

12.2. Infringements of this regulation and/or other inappropriate conduct occurring during the regatta, may be the basis for a hearing under RRS 69.1. The protest committee for such a hearing shall, at a time and place selected by it, meet to hear said protest, and it may impose scoring penalties, or other sanctions that it deems appropriate, including summary removal from the regatta.

13. REGATTA CONTACTS:

	Name	Telephone	Email
Regatta Chair:	Mitchell Burke	(503) 246-5345	director@willamettesailingclub.com

Willamette Sailing Club Youth & High School Sailing Program

Medical Emergency Release & Waiver Form

Name: _____ Date of Birth: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Mother's Name: _____ Phone 1: _____ Phone 2: _____

Father's Name: _____ Phone 1: _____ Phone 2: _____

Please list any known conditions which may preclude the above named child from participating in sailing:

Please list any known conditions which may require consideration in the event of an emergency:

Please list all known allergies:

Do you have Asthma? Yes No If yes, do you carry an inhaler? Yes No

Do you carry an epi-pen? Yes No

Do you have Diabetes? Yes No

In case of emergency:

Contact: _____ Relation: _____ Phone: _____

Personal Physician: _____ Phone: _____

Insurance Carrier: _____ Policy #: _____ Group#: _____

Waiver:

In consideration of my child participating in the Willamette Sailing Club Youth or High School Sailing program, I agree to accept all risk of injury to my child, to hold the Willamette Sailing Club, its officers, directors, employees, and members harmless from any claims of any nature whatsoever arising out of the activities of the Youth or High School Sailing Program.

Should my child be in need of medical treatment, my signature below confirms my permission for this to be done in the event that I cannot be reached promptly.

Parent/Guardian Signature: _____ Date: _____