



SAISA GIRLS DISTRICT CHAMPIONSHIP
March 30, 2019
Notice of Race

Hosted by Jacksonville University Sailing Team & South Atlantic Interscholastic Sailing Association

1. LOCATION - Jacksonville University Sailing Complex, 2800 University Blvd, Jacksonville FL, 32211
2. CLASSES - 420s and FJs and operating equipment will be provided. Boats may be rotated (conditions permitting) among competitors to assure equality of equipment. No advertising may be displayed on the competing boats unless provided by the organizing authority.
3. ELIGIBILITY - The regatta is open to all female high school students. Competing Schools must be members of ISSA and meet eligibility rules as prescribed in the ISSA Procedural Rules and the SAISA Supplementary Rules. Girls on a team must attend the same high school or that high school's feeder school they represent full time and must be in the 8th, 9th, 10th, 11th or 12th grade as of the date of the Regatta and must be listed on their ISSA respective district online team roster. Two to four sailors from the same school will make up the team. If a team wishes to participate, and has not yet paid the ISSA/District (e.g., SAISA district) dues they must first register online as a "Preliminary" member, they will then be provided the opportunity to pay dues at check-in.
4. FEES/REGISTRATION - Registration Fee is \$60 per team and includes 2 shirts/team. Additional shirts will be available for purchase. Make registration checks payable to SAISA. Check and Registration Form should be mailed to Amy Jones, 92 Middleton Dr. Pawleys Island, SC 29585 no later than Monday, March 25, 2019.

Late registrations will be accepted at the sole discretion of the organizers with consideration for available equipment and impact on format and number of races. Damage Deposit of \$100 is due on day of event. Damage Deposit Checks should be made payable to Jacksonville University.

If your registration is accepted to the regatta and your team cannot attend, please notify regatta organizer as soon as possible so that teams on the waiting list can be invited. Teams that cancel after **March 25, 2019 or do not show** shall forfeit their registration fee.

An adult school representative/advisor is required to accompany each team and be responsible for their conduct on and off the water. The team representative, who may be an advisor, coach, or parent, is expected to have full authority to obtain medical treatment for his team members and have the ability to monitor his/her teams' experience in their proficiency to sail in varied conditions as may be encountered.

NOTE: All participating school teams must pre-register for this event.

5. SCHEDULE

Friday, March 29 1400-1800 Boats available for practice

Saturday, March 30 0930 Report Time

0945 Skippers Meeting, 1st Warning Signal to follow

6. AWARDS - Trophies will be awarded to the top three school varsity teams as soon after sailing as possible. The RQ Kress Perpetual Trophy for SAISA Girls District Championship will be awarded to the top team from the SAISA district.

7. RULES - This regatta will be governed by the current ISSA Procedural Rules and the SAISA Supplementary Rules, The Racing Rules of Sailing, the prescriptions of US SAILING, this Notice of Race, and the Sailing Instructions. An official notice board will be maintained at the Jacksonville University Sailing Complex for changes to this notice, the sailing instructions or other notices to competitors. It is the skipper's responsibility to check the board for changes.

8. FORMAT - This will be a one-division regatta with single A-division sailing – minimum 2 sailors per school form a team; teams may rotate through the boats (other sailors may be substituted at this time) per a rotation posted on the day of the event (& there is no rotational restriction between crew and skipper). The number of races in a series will be equal to the number of teams competing in the regatta. Time permitting; the Race Committee will attempt to run multiple series of races. All races will be scored regardless of whether the series was completed. Three races will constitute a regatta. All coaching, including instruction, assistance, equipment or sustenance shall be provided on the organizers spectator boat or on shore. Competitors should expect numerous short races with boat rotations as set forth at the skipper's meeting.

Subject to equipment availability and in consideration of the format for racing, a school team of greater than 4 sailors may register an additional JV team. If a school does not have enough sailors (2) to comprise a team, then they may register a Composite team that is comprised of sailors from registered SAISA teams. JV and/or Composite Teams will not rotate nor receive awards.

9. SAILING INSTRUCTIONS -Sailing Instructions will be available upon check-in.

10. BOATS - Collegiate 420's and FJs will be used, and 12 (twelve) of each will be provided by the venue. Inherently buoyant Personal Flotation Devices (PFDs) including US Coast Guard Type III or V PFDs must be furnished by the competitors. PFDs shall be worn outside of all clothing and foul weather gear, except for a thin athletic (synthetic) T-shirt or team pinny, which may be worn over a lifejacket to prevent snagging of lines or equipment. Inflatable type PFDs are not permitted. Each sailor must have suitable safety gear for weather and temperature conditions. Bailers will not be provided.

11. RACING AREA - Racing will be on St Johns River at or near the Jacksonville University Sailing Complex.

12. SCORING - Low point system for individual races as modified by ISSA Rule 9. Ties will be resolved per procedural rule 11(c).

13. DAMAGE - Damage that requires more than normal maintenance is considered a serious incident. If the Regatta Chairman determines that reasonable care was not used and resulted in damage one or both boats may be disqualified regardless of any alternative penalties already taken. In extreme cases, either or both boats (skipper & crew) may be excluded from the rest of the regatta and held financially responsible for the damages. Due to varied conditions that may be encountered, and the skill level of individual sailors and teams, it is the advisor &/or coaches' decision to sail and participate and their Decision to Race.

14. MEALS - Lunch will not be provided.

15. INFORMATION- Amy Jones 757-297-6926 amylouwhos2@gmail.com

16. ISSA RULE - THE USE OR POSSESSION OF ILLEGAL DRUGS AND/OR ALCOHOLIC BEVERAGES IS ABSOLUTELY PROHIBITED ON AND OFF THE WATER BY ANY COMPETITOR. ANY COMPETITOR USING, POSSESSING, OR BEING UNDER THE INFLUENCE OF SUCH DRUGS OR ALCOHOL WILL BE DISQUALIFIED FROM THE COMPETITION.

2019 SAISA Girls Championship Entry Form

March 30, 2019

Return to: Amy Jones, 92 Middleton Dr. Pawleys Island, SC 29585

by March 25, 2019

School Name: _____

Address: _____

Town/City: _____ State: _____ Zip _____

ISSA District: _____

2. Projected Team Roster. Roster may be changed at registration.

Please fill out one copy of the JU waiver provided on the SAISA site for each competitor.

Name:	Graduation Year:	Name:	Graduation Year:
1. _____	_____	5. _____	_____
2. _____	_____	6. _____	_____
3. _____	_____	7. _____	_____
4. _____	_____	8. _____	_____

3. Contact/ Chaperone/ Coach Information:

Team Contact (Traveling with team), Coach (If you will have one with you):

Cell Phone: (____) _____ E-Mail: _____

4. Food: Lunch is provided for SAILORS.

5. Entry fee and Damage: Entry Fee (\$60 payable to SAISA). Damage Deposit:(\$100) payable to Jacksonville University. Damage deposit can be submitted day of event.

Jacksonville University Sailing Team

Release of Liability and Assumption of Risks

This form must be signed by all participants in Sailing (the "Activity") at Jacksonville University. This Release of Liability and Assumption of Risks Agreement must be completed annually. It is strongly recommended that participants purchase insurance that covers accidents which may occur during athletic and other activities while at Jacksonville University. Please write legibly and provide the appropriate response in all blank spaces.

Participant Name: _____

DOB ____/____/____ mm / dd / yyyy E-mail: _____

Local Address: _____ City, State, ZIP: _____

Phone Number: _____

Emergency Contact: _____ Relationship: _____ Phone: (____) _____

I understand that Jacksonville University does not require me to participate in this Activity, but I want to do so despite the possible dangers and risks and notwithstanding this Release of Liability and Assumption of Risks Agreement. In consideration for the benefits to be derived from my participation in the above Activity, I hereby acknowledge the following: (1) I am aware that all activities involve risk, and that some are violent contact sports; (2) I am aware that playing or practicing in any activity may be dangerous and involve many risks of injury; and (3) I UNDERSTAND THAT THE DANGERS AND RISKS OF PLAYING OR PRACTICING THE ACTIVITY COULD RESULT IN PHYSICAL OR PSYCHOLOGICAL HARM AND RANGE FROM MINOR INJURIES SUCH AS SCRATCHES, BRUISES OR SPRAINS; MAJOR INJURIES SUCH AS CONCUSSION, JOINT OR BACK INJURIES OR HEART ATTACK; OR CATASTROPHIC INJURIES SUCH AS PARALYSIS OR DEATH. I further understand and acknowledge that the dangers and risks of playing or practicing the Activity may result not only in injury, but serious impairment of my future abilities to earn a living, to engage in other business, social, and recreational activities, and generally to enjoy life. I understand that these injuries or outcomes may arise from my own or others' actions, inaction, or negligence; conditions related to travel; or the condition of the Activity location(s). **Nonetheless, I assume all related risks, both known and unknown to me, of my participation in the Activity, including travel to, from, and during the Activity.**

Because of the danger of participating in the above Activity, I acknowledge and understand the importance of following any and all rules and regulations established by Jacksonville University and/or the Jacksonville University Sailing Team. I hereby agree to obey such rules, regulations, and instructions.

I further acknowledge that I am in good physical condition and do not know of any condition or reason that I should not participate in the Activity. I ALSO REALIZE THAT SPORTS INJURIES CAN BE

CATASTROPHIC FOR THOSE WITHOUT PROPER MEDICAL COVERAGE. **I hereby release, waive, discharge, and covenant not to sue** Jacksonville University, and its coaches, officers, trustees, directors, volunteers, agents, and employees (collectively "JU") from any and all claims, demands, damages, actions, liabilities, causes of action, or suits in equity of whatever kind or nature, **including, without limitation, claims of JU's negligence**, resulting from any physical or psychological injury (including paralysis and death), illness, damages, or economic or emotional loss I may suffer because of participation in the Activity, including travel to, from, and during the Activity.

I agree to indemnify and hold JU harmless from all losses, liabilities, damages, costs or expenses (including but not limited to reasonable attorneys' fees and other litigation costs and expenses) incurred by JU as a result of any claims or suits that I (or anyone claiming by, under or through me) may bring against JU to recover any losses, liabilities, costs, damages or expenses which arise during or result from my participation in the Activity, regardless of whether or not caused in whole or in part by the negligence or other fault of JU.

I understand that the terms hereof serve as a release and assumption of risk for me as well as my heirs, estates, executors, administrators, and assignees.

I hereby give consent for JU to provide me with medical care and treatment and emergency medical services associated with participation in the Activity. I agree to assume all costs related to such treatment, including transportation costs. I further authorize the release of any medical information necessary to process a claim for accident/medical payment insurance for an injury or illness incurred while I am participating in the Activity.

I grant permission for JU to take and make public visual/audio images of me. I agree that JU owns the images and all rights to them. Without notification to me, the images may be used in any manner or media, including but not limited to, JU-sponsored websites, publications, promotions, advertisements, or posters. I waive any right to inspect, approve, or be compensated for the use of such images.

I have read this document in its entirety and understand all of the terms and conditions it contains. I am signing this document freely. No oral representations, statements, or inducements apart from this general release of liability and assumption of risk form have been made. I execute this document for full, adequate, and complete consideration fully intending to be bound by the same, now and in the future.

I agree that this document shall be governed for all purposes by Florida law, without regard to such law on choice of law.

THIS IS A RELEASE OF YOUR RIGHTS, READ CAREFULLY AND UNDERSTAND BEFORE SIGNING.

IF YOU ARE UNDER 18 YEARS OF AGE, you must have a parent or legal guardian sign in the section BELOW, marked "For Participants under 18 years of age."

Participant Signature: _____

Participant Name (print): _____

Date: _____

For Participants under 18 years of age:

I am the parent or legal guardian of the Participant. **I understand the legal consequences of signing this document, including: (a) releasing JU from all liability on my and the Participant's behalf, (b) promising not to sue on my and the Participant's behalf, and (c) assuming all risks of the Participant's participation in the Activity, including travel to, from, and during the Activity.** I allow Participant to participate in the Activity. I give my consent to JU and its medical representatives to obtain medical care from any licensed physician, hospital, clinic, or medical provider for the Participant for injury that could arise from the Activity. I agree to be financially responsible for any costs incurred as a result of such medical care. I understand that I am responsible for the obligations and acts of Participant as described in this document. I agree to be bound by the terms of this document.

I have read this document, and I am signing it freely. No other representations concerning the legal effect of this document have been made to me.

Signature of Minor Participant's Parent/Guardian

Name of Minor Participant's Parent/Guardian (print)

Date

Minor Participant's Name