



# Mississippi State High School Fleet and Team Racing Championships Regatta

## **NOTICE OF RACE**

**Bay-Waveland Yacht Club  
March 16-17, 2024**

### **1. RULES**

- 1.1 The regatta will be governed by the Racing Rules of Sailing 2021-2024 (RRS) as changed by Appendix D (for team racing), Prescriptions of U.S. Sailing, ISSA Procedural Rules, SEISA Supplemental Rules, this NOR, and the Sailing Instructions.
- 1.2 This NOR covers 2 regattas in one over the weekend – Fleet Racing intended to be sailed on Saturday and Team Racing on Sunday. Weather may alter the day or timing of one or both of these.
- 1.3 The fleet racing championships will be an A/B two-division regatta.
- 1.4 The team racing championship will be the usual 3 boats vs 3 boats scenario.
- 1.5 For team racing, RRS D2.6 Limited Umpiring and RRS D2.2 “single flag procedure” shall apply. Flags will be provided.
- 1.6 RRS Appendix P is in effect modified per ISSA Procedural Rule 14(c).
- 1.7 The organizing authority (OA) is SEISA, BWYC, and St. Stanislaus College (SSC).
- 1.8 Sailing Instructions (SI) will be available at registration on Saturday morning.

### **2. ELIGIBILITY AND ENTRY**

- 2.1 Competing teams must be current members of SEISA and in good standing with ISSA. A team is comprised of at least four sailors for fleet racing and at least six sailors for team racing who are members of the sailing team for the school they represent.
- 2.2 Out-of-state teams may enter and compete in the overall category, but will not be eligible to win the state championship trophies.
- 2.3 Sailors in grades 7-12 are eligible competitors in this regatta. This changes ISSA PR III, 1.2.
- 2.4 Each team must designate a responsible adult (who may or may not be the team coach, but who is not a team member or high school student) who is responsible for and must accompany the school’s team and remain onsite during sailing at each competition. (See ISSA PR 1.3 for more information.)
- 2.5 Eligible schools and sailors must enter by submitting the official entry form and two separate checks, one for entry fee, and one for boat damage deposit by March 15th, 2024 payable to “SSC” and sent to Dan Zwerg, 304 South Beach Blvd., Bay St. Louis, MS 39520.

### **3. ENTRY FEES**

- 3.1 \$125 per team entry fee shall be paid with entry form.
- 3.2 Each team shall pay a separate damage deposit of \$100 with registration. This is refundable if the boat and gear are returned undamaged. In the event damage cannot be attributed to a particular team, the repair costs will be divided evenly amongst all the competing teams.
- 3.3 Lunch is NOT included in the entry fee. Food may be purchased from the yacht club.

#### 4. BOATS

- 4.1 Boats will be the Club 420.
- 4.2 Boats and sails will be provided. If additional boats are needed, we will coordinate with specific teams to be sure the boats are as closely matched as possible.
- 4.3 Rotations and schedule will be assigned at the competitor's meetings. OA reserves the right to alter this if conditions warrant.

#### 5. SCHEDULE OF EVENTS

Saturday, March 16, 2024 Fleet Racing		Sunday, March 17, 2024 Team Racing	
Registration	0830-0900		
Competitor's Meeting	1000	Competitor's Meeting	1000
First Signal	1100	First Signal	1100
Trophy Presentation EACH DAY as soon as possible after the conclusion of racing.			

- 5.1 Changes to the schedule will be posted on the official notice board located on the upstairs landing.

#### 6. RACING AREA

- 6.1 All races will be sailed in front of BWYC on St. Louis Bay.

#### 7. COURSES

- 7.1 The course for fleet racing will be course LA2 (See ISSA PR 7.8 and example course card on ISSA PR page 17).
- 7.2 The course for team racing will be the Digital N course (See ISSA PR Appendix 6).

#### 8. SCORING

- 8.1 The number of races intended is two round robins. One completed round shall constitute a regatta.
- 8.2 The regatta will be scored in accordance with ISSA Procedural Rules and the RRS as modified in 8.3.
- 8.3 For team racing, in the event that a partial round is at least 80% complete and the numbers of races teams have sailed are not equal, the latest race or races for a team or teams will be disregarded so that all teams are scored with an equal number of races. The latest race is defined as the highest numbered race for that team completed on the rotation sheet. This is an exception to RRS D4.3a.
- 8.4 Scores will be kept in TechScore and viewable by the public at: <http://scores.hssailing.org>
- 8.5 In accordance with ISSA PR 4.3, each team must complete a Record of Participation at <http://ts.hssailing.org> by the close of protest time at the end of EACH DAY of the regatta. Failure to do so will result in significant penalties per ISSA PR 4.3.

#### 9. PROTESTS

- 9.1 Competitors protesting a boat shall comply with RRS Appendix D2.2 (team racing), single flag procedure for umpired races. See ISSA PR Appendix 7 for more information. Competitors protesting a boat shall comply, where applicable, with ISSA PR Part VI and RRS 61.1. Failure to do so may be grounds for closing the protest hearing under RRS 63.5.
- 9.2 Competitors shall not communicate with anyone other than competitors involved in the protest before reporting to the Race Committee the intention to file a protest.

#### 10. PRIZES

- 10.1 1<sup>st</sup>, 2<sup>nd</sup>, and 3<sup>rd</sup> place trophies will be awarded to the top-placing Mississippi teams and top-placing teams overall in both fleet racing and team racing. The "Mississippi State Fleet Racing Champion" and winner of the perpetual trophy, "The Rock" will be the top scoring Mississippi team in fleet racing. Likewise, the "Mississippi State Team Racing Champion" will be the top scoring Mississippi team in team racing.

## **11. SUPPORT AND COACH BOATS**

- 11.1 Support and coach boats are explicitly permitted. All personnel are encouraged and expected to render assistance to any boat in need, regardless of team. This is a specific exception to ISSA PR 8(a).
- 11.2 Coaching may only take place between races in an area designated by the PRO. During races, unless rendering assistance, coach boats should stay well-clear of boats racing.
- 110.2 The nearest boat launch for powerboats is at BWYC.

## **12. SAFETY AND SPECIAL CLOTHING**

- 12.1 In addition to the requirements of RRS Rule 40 and it's U.S. Sailing Prescription, a condition of entry and participation in this regatta is the wearing of a U.S. Coast Guard approved PFD, properly secured at all times while on the water, except for brief periods while removing or adding clothing. Wet suits, dry suits, buoyancy aids, and inflatable PFD's do not constitute adequate personal buoyancy.
- 12.2 It is highly recommended that teams wear a uniform (pinnie or something similar worn on the outside the PFD) designating their school. See ISSA PR 2.5 for guidance.

## **13. WAIVER OF LIABILITY**

- 13.1 Sailing is an activity that has an inherent risk of damage and injury. Competitors in this event are participating entirely at their own risk. See RRS 4, Decision to Race.
- 13.2 The race organizers (organizing authority, race committee, protest committee, host club, sponsors, or any other organization or official) will not be responsible for damage to any boat or other property or the injury to any competitor, including death, sustained as a result of participation in this event. By participating in this event, each competitor agrees to release the race organizers from any and all liability associated with such competitor's participation in this event to the fullest extent permitted by law.

## **14. RIGHTS TO USE NAME AND LIKENESS**

- 14.1 By participating in this event, competitors automatically grant to the organizing authority and the event sponsors the right, in perpetuity, to make, use and show, at their discretion, any photography, audio and video recordings, and other reproductions of them made at the venue or on the water from the time of their arrival at the venue, until their final departure, without compensation.

## **15. OFFICIAL NOTICE**

- 15.1 No contestant shall use, either on or off the water, marijuana or any other controlled substance, as defined in 21 U.S. Code 802, the possession of which is unlawful under U.S. Code 841, or alcoholic beverages (distilled spirits, wine, and beer, each as defined in Chapter 51 of the U.S. Internal Revenue Code and intended for beverage use). An alleged breach of this procedural rule shall not be grounds for a protest. However, when a report is received from any source, alleging such a breach a protest committee consisting of the regatta chairperson, a member of the ISSA Board of Directors, and the chairperson of the protest committee, shall follow the process described in RRS 69.1(b). If a hearing under RRS 69 is held, a competitor found to have breached this procedural rule shall be excluded from the remaining races of the series and, where practical, be removed from the regatta venues and sent home. Additional penalties consistent with RRS 69.2 may be imposed on the competitor or the competitor's team. This regulation is in effect during the entire event from the date and time of arrival through the date and time of departure from the regatta site.

## **16. FURTHER INFORMATION**

- 16.1 For further information please contact  
Regatta Chair and SEISA Representative: Dan Zwerg, dzwerg@ststan.com, 228-327-4557  
Principal Race Officer: Todd Edwards, 225-413-4453

# Mississippi State High School Fleet and Team Racing Championships Regatta Entry Form

This form must be received by **March 15, 2024**. Please return to:  
Dan Zwerg, [dzweg@ststan.com](mailto:dzweg@ststan.com), 304 South Beach Blvd., Bay St. Louis, MS 39520

## 1. School Data:

School's Name: \_\_\_\_\_

Address: \_\_\_\_\_

Town/City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

ISSA District: \_\_\_\_\_

## 2. Projected Team Roster

*Please fill out one copy of the waiver below for each competitor.*

Name:	Graduation Year:	Name:	Graduation Year:
1. _____	_____	6. _____	_____
2. _____	_____	7. _____	_____
3. _____	_____	8. _____	_____
4. _____	_____	9. _____	_____
5. _____	_____		

## 3. Contact/ Chaperon/ Coach Information:

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

\_\_\_\_\_

Cell Phone: (\_\_\_\_) \_\_\_\_\_ E-Mail: \_\_\_\_\_

## 4. Entry fee and Damage deposit:

Entry fee (\$125) and damage deposit (\$100), as prescribed in the Notice of Race are enclosed.

Make both checks payable to: **SSC**

Note: Money for lunches is payable separately to: **BWYC**

Sailor Name: \_\_\_\_\_ School Name: \_\_\_\_\_

**WAIVER OF LIABILITY/ASSUMPTION OF RISK**  
**2024 Mississippi State High School Fleet and Team Racing Championships Regatta**

As the parent/guardian of the above named student, I hereby acknowledge that the risk of injury, including serious debilitating injury, is involved in athletic participation. I am aware that the activities associated with this event involve maneuvering a boat on deep waters in potentially hazardous conditions which may include, among other things, strong winds and high waves, sudden and unexpected immersion in deep waters, and collision with other watercraft and/or stationary objects such as docks and buoys. I am aware of the risks involved and give my consent for the above named student to participate in all activities associated with the Mississippi State High School Team Racing Championship Regatta. I accept any and all risks to the above named student of injury, death and property damage arising from participation in this event whether or not caused by the negligence or other action, except irrational acts of ISSA, SEISA, Bay Waveland Yacht Club, St. Stanislaus College, their Officers, Directors, Trustees, agents, employees, coaches, vendors, and any other persons associated with this event (herein referred to as the "Releases"). I waive and release any right I, my heirs, distributes, guardians, legal representatives and assigns may have or acquire to make a claim against, sue, attach the property of, or prosecute the ISSA, Bay Waveland Yacht Club, St. Stanislaus College, their Officers, Directors, Trustees, agents, employees, coaches, vendors, or other associated persons, for monetary damages caused by injury to the above named student, or damage to the property of the above named student arising from the above named student's participation in this event and the use of the facilities and property of ISSA, Bay Waveland Yacht Club, or St. Stanislaus College, whether or not the injury or damage results from the negligence or other action, except irrational acts, of ISSA, SEISA, Bay Waveland Yacht Club, St. Stanislaus College, their Officers, Directors, Trustees, agents, employees, coaches, vendors, and any other person associated with this event. I further release and hold the Releases harmless from any loss, liability, damage or cost including reasonable attorney's fees that may occur due to the named student's participation in this regatta.

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Relation to Named Student: \_\_\_\_\_

Sailor Name: \_\_\_\_\_ School Name: \_\_\_\_\_

**AUTHORIZATION TO CONSENT TO TREATMENT OF A MINOR**  
**2024 Mississippi State High School Fleet and Team Racing Championships Regatta**

The undersigned parent or guardian of a minor does hereby consent to emergency X-ray, anesthetic, medical, or surgical diagnosis or treatment and hospital care which is deemed advisable by, and is to be rendered under the general or special supervision of any physician and surgeon licensed under the provisions of the Medical Practice Act, or dentist under the Dental Practice Act. It is understood that this authorization is given in advance of any special diagnosis, treatment, or hospital care being required, but is given to provide authority and power to render care which the aforementioned physicians in the exercise of their best judgment may deem advisable. It is understood that efforts shall be made to contact the undersigned or Emergency Contact prior to rendering treatment, but treatment will not be withheld if they cannot be reached.

1. Family Doctor: \_\_\_\_\_ Phone: \_\_\_\_\_

2. Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

3. Medical Problems: \_\_\_\_\_

4. Known Allergies: \_\_\_\_\_

5. Hospital Insurance Plan Name/Number: \_\_\_\_\_  
\_\_\_\_\_

SIGNATURE (Parent or Legal Guardian): \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Mother's Phone (h): \_\_\_\_\_ (w): \_\_\_\_\_ (c): \_\_\_\_\_

Father's Phone (h): \_\_\_\_\_ (w): \_\_\_\_\_ (c): \_\_\_\_\_