

# 2018 LTHS Fall Classic & GO Qualifier TEAM Entry Form

This form must be received by **Oct 11, 2018**. Please return to:

[jeffbrock@me.com](mailto:jeffbrock@me.com)

## 1. School Data:

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

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

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

## 2. Projected Team Roster - may be changed at registration. *Please fill out one copy of the waiver for each competitor.*

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

## 3. Contact/ Chaperone/ Coach Information:

**Team Chaperone** (Traveling with team),

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

**Coach** (If you will have one with you):

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

**5. Damage deposit:** Damage deposit **\$200.00** payable to Austin Yacht Club as prescribed in the Notice of Race to be turned in on-site at check-in.

**2018 LTHS Fall Classic  
Individual Competitor Form**

This form must be returned by **October 11, 2018**. Please email to:  
[jeffbrock@me.com](mailto:jeffbrock@me.com)

**Entrant Information:**

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

Team: \_\_\_\_\_

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

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

**Parent/Guardian Information:**

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

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

**Supervising Adult On-Site:**

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

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

**Waiver:**

If you are not an AYC sailor, registered in the AYC HS sailing program, the AYC Waiver form must be emailed to <mailto:jeffbrock@me.com>, or brought to the regatta on Saturday morning.