

COACH FORM

TO ORGANIZING AUTHORITY : CIRCOLO VELA TORBOLE SCSD
(info@circolovelatorbole.com)

FOR THE EVENT : EurILCA EUROPA CUP -2nd International Torbole Spring Cup

Which will take place : 2022 May, 12th-15th

The undersigned

Name and Surname of the Coach:	
Club	
Motorboat	
Model:	
Motor:	License(up to 40hp) <input type="checkbox"/>
Telephone number of the coach in case of emergency:	

ASKS

to be allowed to go out in the water with the above described vehicle during the event in question.
I explicitly declare that I accept all the rules indicated in the I.Sa.F. RRS in force, in the Notice, in the I.Sa.F. RRS, in the Notice, in the Instructions and in the other Rules and Regulations governing this event.
Pursuant to art. 6, paragraph 1), lett. a) of the EU Regulation n. 679/2016 (GDPR) I hereby authorise Circolo Vela Torbole to process my personal data for the exclusive purposes related to the organisation and management of the regatta and better detailed in the information note on the processing of personal data which I expressly declare to have read.

DATE _____

SIGNATURE _____

OFFICE

COACH FEE: € 50,00

Flag Permission Number _____

Deposit € 20,00 (only cash)

The coach is authorised to go out into the water during the event.
This authorisation may be revoked at any time at the discretion of the Organising Committee.

EurILCA EUROPA CUP -2nd International Torbole Spring Cup

ATHLETES

Name	Sail number
Name	Sail number
Name	Sail number
Name	Sail number
Name	Sail number
Name	Sail number
Name	Sail number
Name	Sail number
Name	Sail number
Name	Sail number
Name	Sail number
Name	Sail number
Name	Sail number

The coach declares that he/she is qualified to drive the boat and that the boat is in order with the documents required by law and with the safety equipment provided.

Date _____ Signature _____



Consent for a minor's participation in a EurILCA sailing championship Europa Cup Italy

Please ensure that all sections are completed and you have signed at the bottom of the form.

In accordance with the Notice of Race, each sailor under 18 years old shall bring to registration a completed parent/guardian consent form valid for the duration of the regatta.

To be completed and signed by the parent / guardian of all entrants under 18 years of age.

BOX A - Sailor and Responsible Adult details

Name of sailor (the minor)

e.g. John Smith

Name of the responsible adult attending event

e.g. Richard Brown

Mobile phone number of responsible adult

e.g. + (Country code) 123456789

BOX B - Parent / guardian details

Name of parent / guardian

e.g. Mary Smith

Address

Telephone number:

Daytime

Evening

Mobile

FAILURE TO RETURN THIS FORM WILL RESULT IN YOUR ENTRY TO THE CHAMPIONSHIP BEING CANCELLED AS PER THE NOTICE OF RACE

Upon arrival at the club the responsible adult will be required to sign to acknowledge their acceptance of responsibility for the minor.

Agreement

I, the parent / guardian have legal custody of the minor. I hereby authorize the responsible adult to act as my nominated person at the championship. I agree that this authorization shall remain in effect for the duration of the minor's participation in the championship and related activities and shall not be revoked before the end of the championship.

Non-Liability of the club and the class

I agree that in no event will the club or the class, their parent companies, affiliates, or the partners, owners, directors, officers, employees, agents and committee persons have any liability whatsoever arising from or in connection with any action or non-action of the responsible adult.

I, the parent / guardian understand and agree to the terms of entry as detailed in the Notice of Race and confirm that the responsible adult will accompany the minor for the duration of the championship.

By signing I certify that I have carefully read, understand and agree to the above agreement and non-liability statement.

Signature of parent / guardian: _____

Date: _____