



# ENTRY FORM

## Europa Cup Sweden

Insurance : Yes / No  
Measurement form : Yes / No  
Membership : Yes / No

Boat			
Sailor's Name		Sailor Id	
Date of Birth		Gender	
Class		Category	
Club Name			
Coach		Coach cellular e-mail adress	

### Liability

I hereby acknowledge that the host club, the host National Authority, the EurILCA, their officers, members and volunteers do not accept any liability for loss of life or property, personal injury or damage to property caused by or arising out of the above Race, and that I take part in the regatta entirely at my own risk. I agree to be bound by the Racing Rules of the World Sailing and the ILCA Class Rules as amended by the sailing instructions and the official race notices. I understand and accept that personal accident and health insurance is my sole responsibility.

The sailor declares to have a third part insurance

Insurance compagny		Insurance expire date	
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### **This form includes the race results and event pictures publication authorization.**

By participating in this event, I 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 for the purpose of news reporting, regatta documentary, advertising to promote the regatta, the national or the international class association, and advertising where the above pictures/video recordings/etc are shown in the context of sailors/participants competing in a EurILCA Europeans.

I agree to publish race results on Eurilca websites including my personal data as competitor (Name, Age category, Sex, Sailing Club, Sailing number, Score).

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

**Signature :**