



**SPERRY TOP-SIDER  
NATIONAL OFFSHORE ONE-DESIGN REGATTA  
SEATTLE, WASHINGTON**

**WAIVER AND RELEASE OF LIABILITY**

In consideration of being allowed to participate in the Event on behalf of myself, my heirs, successors and assigns, I hereby waive any and all claims, actions, suits and demands against Bonnier Corporation, publisher of Sailing World Magazine, and its employees, officers, directors and affiliates, all corporate sponsors, and all host organizations including the Seattle Yacht Club, the Corinthian Yacht Club, and the Port of Seattle, including their respective employees, officers, trustees and members of the Event, all of which are incorporated by reference herein, (all of the foregoing hereby referred to as "Releasees") for any personal injury (including death) or property damage resulting from the negligence or other acts or omission by the Releasees as a result of my participation in the Event and do hereby release and discharge the Releasees therefrom.

The undersigned acknowledge that participation in the sport of yachting or in the Event involves substantial risk of personal injury or even death and the undersigned hereby assume the risk of any such injury that may occur while practicing for or participating in the Event.

This release is executed in accordance with and shall be governed by the general laws of Rhode Island.

**I HAVE CAREFULLY READ THIS WAIVER AND RELEASE OF LIABILITY  
AND FULLY UNDERSTAND ITS CONTENTS.**

**WITNESS**

**OWNER/SKIPPER**

SIGNATURE \_\_\_\_\_

YACHT NAME \_\_\_\_\_

NAME (PRINT) \_\_\_\_\_

BOAT TYPE/CLASS: \_\_\_\_\_

\_\_\_\_\_

NAME (PRINT) \_\_\_\_\_

ADDRESS \_\_\_\_\_

SIGNATURE \_\_\_\_\_

CITY \_\_\_\_\_

ADDRESS \_\_\_\_\_

STATE \_\_\_\_\_ ZIP \_\_\_\_\_

CITY \_\_\_\_\_

DATE \_\_\_\_\_

STATE \_\_\_\_\_ ZIP \_\_\_\_\_

**Crew members** who intend to participate in the Event should carefully read the foregoing and **sign the back of this waiver form.** Additional waiver forms will be provided at the Event registration for any additional crew members who have not signed this release.

**PLEASE BRING THIS FORM TO REGISTRATION  
OR YOU WILL NOT BE REGISTERED FOR THIS EVENT**

The Sperry Top-Sider NOOD Regatta Headquarters  
55 Hammarlund Way • Middletown, RI 02842 USA  
TELEPHONE 401-845-5100 • FAX 401-845-5180 • email: nood@sailingworld.com

## WAIVER AND RELEASE OF LIABILITY FOR CREW MEMBERS

In consideration of being allowed to participate in the Event on behalf of myself, my heirs, successors and assigns, I hereby waive any and all claims, actions, suits and demands against Bonnier Corporation, publisher of Sailing World Magazine, and its employees, officers, directors and affiliates, all corporate sponsors, and all host organizations including the Seattle Yacht Club, the Corinthian Yacht Club, and the Port of Seattle, including their respective employees, officers, trustees and members of the Event, all of which are incorporated by reference herein, (all of the foregoing hereby referred to as "Releasees") for any personal injury (including death) or property damage resulting from the negligence or other acts or omission by the Releasees as a result of my participation in the Event and do hereby release and discharge the Releasees therefrom.

The undersigned acknowledge that participation in the sport of yachting or in the Event involves substantial risk of personal injury or even death and the undersigned hereby assume the risk of any such injury that may occur while practicing for or participating in the Event.

This release is executed in accordance with and shall be governed by the general laws of Rhode Island.

### I HAVE CAREFULLY READ THIS WAIVER AND RELEASE OF LIABILITY AND FULLY UNDERSTAND ITS CONTENTS.

#### RELEASE OF LIABILITY FOR CREW MEMBERS:

(PLEASE PRINT)

NAME \_\_\_\_\_ SIGNATURE \_\_\_\_\_

ADDRESS \_\_\_\_\_ DATE \_\_\_\_\_

NAME \_\_\_\_\_ SIGNATURE \_\_\_\_\_

ADDRESS \_\_\_\_\_ DATE \_\_\_\_\_

NAME \_\_\_\_\_ SIGNATURE \_\_\_\_\_

ADDRESS \_\_\_\_\_ DATE \_\_\_\_\_

NAME \_\_\_\_\_ SIGNATURE \_\_\_\_\_

ADDRESS \_\_\_\_\_ DATE \_\_\_\_\_

NAME \_\_\_\_\_ SIGNATURE \_\_\_\_\_

ADDRESS \_\_\_\_\_ DATE \_\_\_\_\_

NAME \_\_\_\_\_ SIGNATURE \_\_\_\_\_

ADDRESS \_\_\_\_\_ DATE \_\_\_\_\_

NAME \_\_\_\_\_ SIGNATURE \_\_\_\_\_

ADDRESS \_\_\_\_\_ DATE \_\_\_\_\_

NAME \_\_\_\_\_ SIGNATURE \_\_\_\_\_

ADDRESS \_\_\_\_\_ DATE \_\_\_\_\_

NAME \_\_\_\_\_ SIGNATURE \_\_\_\_\_

ADDRESS \_\_\_\_\_ DATE \_\_\_\_\_