



LAKE CHARLEVOIX MARINERS



MICHIGAN STATE UNIVERSITY | Extension

2014 Jr. Venetian Cup Regatta
Tuesday, July 22nd
Depot Beach, Charlevoix, Michigan
Organized & Hosted by –

Lake Charlevoix Mariners, 4-H, and MSU Extension

NOTICE OF RACE

1 - RULES — The regatta will be governed by the rules as defined in *The Racing Rules of Sailing*.

2 - ELIGIBILITY AND ENTRY —

2.1 - This regatta is open to all Junior Sailors (ages 8-19), regardless of club affiliation, and will be sailed in JY-15's (either those owned by the sailing school or your own if you wish to bring one).

2.2 - Eligible competitors (skippers and crew) may enter by completing the attached entry form and mailing it with the race fee and signed parental waiver or brought to the skippers meeting.

Mail to:

Lake Charlevoix Mariners – Jr. Venetian Cup Regatta
704 E Dixon, Charlevoix, MI 49720

2.3 – Lake Charlevoix Mariners will supply boats. We have 10 JY-15's that will be set up for the races. If you have your own JY-15 you would like to bring, please contact Tom Ochs at 231-675-1119 or at ochsman_north@yahoo.com.

2.4 – Crews will be assigned at the skippers meeting. Registrants who have peers wishing to be crews are welcome to make their own crews (of 2 or 3 total persons). Registrants who do not have crews already will be put into a lottery and assigned crew members.

2.5 – Boat assignment of sailing school JY's will be by lottery. Time permitting, crews using sailing school JY's will be rotated to different boats between races.

3 - FEES — The entry fee is \$15 per competitor.

4 - SCHEDULE —

4.1 - Registration — 9:00 to 10:00 AM

4.2 - Skippers meeting — 10:00 AM

4.3 – 10:30 Boat Setup & Launch

4.3 - Warning signal for the first race — 10:45

5 - SAILING INSTRUCTIONS — will be available at registration.

6 - VENUE — The regatta will be held at Depot Beach on Lake Charlevoix in Charlevoix, Michigan.

When entering Charlevoix from the north, follow the signs for the USCG Station just before the golf course.

When entering Charlevoix from the south, drive through town, over the bridge, and up the hill. At the top of the hill, turn right and follow the signs to the USCG Station.

There will be signs near Depot Beach pointing directions to the registration area.

7 - THE COURSES — The courses to be sailed will be windward/leeward courses of 2, 3 or 4 legs.

8 - SCORING —

8.1 - As many races will be run as time allows with 1 race completed to constitute a series.

8.2 - If 5 or more races are completed, 1 throw-out will be allowed.

9 - PRIZES —Trophies will be awarded to the top 3 in each class.

10 - DISCLAIMER OF LIABILITY — Competitors participate in the regatta entirely at their own risk. See rule 4, Decision to Race. The organizing authority will not accept any liability for material damage or personal injury or death sustained in conjunction with or prior to, during, or after the regatta.

11 - FURTHER INFORMATION — contact Tom Ochs at 231-675-1119 or at ochsman_north@yahoo.com.

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ENTRY FORM

COMPETITOR NAME _____

Male Female Birth Date _____

Age as of 1/1/14 _____ Grade completed this year _____

Parents Names _____

E-mail _____

Permanent Address _____

City _____ State _____ Zip _____

Phone _____

ENTRY FEE IS \$15

PAYMENT METHOD _____ CASH _____ CHECK (Payable to Lake Charlevoix Mariners)

PERMISSION TO PARTICIPATE

The 4-H sailing staff is trained to handle emergencies on the water. They hold American Red Cross certificates for first Aid and CPR and all youth are required to wear Coast guard certified life jackets at all times. These factors minimize risk to the participants in the unlikely event of an accident or injury. In consideration of accepting my child's entry, I hereby, for my child waive and release any and all rights and claims for damages my child may have against the county of Charlevoix, the Charlevoix County 4-H Sailing program, and all representatives of the above, for any and all injuries suffered by my child at any activity sponsored by these groups. I also grant permission for medical treatment to be administered to my Child in the event of an emergency and I assume responsibility for the expense incurred for medical attention throughout the duration of the Program.

List all allergies, medications, bee stings, etc.

Date of last tetanus _____

Is your child on any daily medications? _____

Parent/Guardian Signature

Date

MEDIA RELEASE FORM

All participants attending MSU – sponsored events (4-H Sailing) must complete this section of the form. Participants are sometimes photographed and Video-taped for use in MSU promotional and educational materials. I authorize Michigan State University to record the image and voice of the subject named below and give MSU and all persons or entities acting pursuant to MSU’s permission or authority, all rights to use of these recorded images and voice. I understand that said images and/or voice will be used for educational, advertising and promotional purposes in all conventional and electronic media, including but not limited to the Internet, and any future media. I also authorize the use of any printed material in connection therewith. I understand and agree that these images and recordings may be duplicated, distributed with or without future or further compensation or liability, in perpetuity.

Child’s Name: _____
(please print)

Parent or Guardian Signature Date
(Parent/guardian must sign - if student is under age 18)

The following information is used to gather statistics and to determine compliance with civil rights laws.

Residence:

- Farm
- Town ≤ 10,000
- Town 10,000 to 50,000
- Suburb ≥ 50,000
- City ≥ 50,000

Ethnicity: (√ one)

- Hispanic Not Hispanic

Racial Groups: (√ all that apply)

- White
- Black
- American Indian
- Asian
- Hawaiian or Pacific Islander