

WYA & Titahi Bay Boating Club



OPTISAIL 2019 - APPLICATION FORM

23rd - 25th January 2019

Your Name: Your Address:		-	Titahi Bay Boating Club C/- John Goodman 43 Exploration Way, Whitby, Pori	rua
		_	ENQUIRIES TO: Ph: 04 234 8910 (home) Email: j.goodman@xtra.co.nz	
Email Address:		_		
Phone No: (da	y)	(evening)		
Date of Birth:/_/				
Which yacht club do you belong to?				
Your Boat's Name:		Your Sail No:		
Do you have any YNZ Certificates?		Level 1	Level II	
Your Parent / Guardian's Name:				
Your Parent / Guardian's Emergency	/ Contact Number	:		
Is your Guardian available to help? (please tick all boxes that apply - a roster will be drawn up and no one will do more than two sessions)	Wednesday: Thursday: Friday:		2pm-7pm	
Do you have any special medical or dietary needs?				
☐ I agree to comply with the conditions ☐ I have enclosed a cheque for \$200 pa ☐ I have transferred \$200 to Titahi Bay I please put your surname in one of the Signature of Parent / Guardian	yable to Titahi Bay E Boating Club's bank	Boating Club OR account (ANZ acc	ount number 01 0546 0006842 03	

LIABILITY Yachting New Zealand, the WYA and Titahi Bay Boating Club, their sponsors, officers, employees, members or volunteers, do not accept any liability for loss or damage (material or personal) suffered during or arising at Optisail 2019. It is the individual's responsibility, if so desired, to ensure they have adequate insurance cover for boats, equipment and personal effects.