

Consent & Waiver of Liability Agreement

Complete one form for each participating sailor. If sailor is under 18 years of age, form must be signed by parent or designated legal guardian.

LAST NAME: _____ FIRST NAME: _____ BIRTH DATE: _____

ADDRESS: _____ CITY: _____

STATE: _____ ZIP: _____ PHONE #(S): _____

I recognize sailing can be a hazardous sport which can result in serious injury or death. I accept the risks inherent in sailing and its environment, and I accept full responsibility for all medical expenses and claims incurred as a result of my participation in any activity of Whatcom Community Sailing (WCS) the Bellingham School District (BSD), Western Washington University (WWU), and the Bellingham Yacht Club (BYC). I also agree to release, hold harmless and indemnify WCS, BSD, WWU & BYC, its officers, shareholders, directors, agents, employees, coaches, and insurers for any claims for personal injury or property damage resulting from any cause including negligence, which arise out of participation in WCS, BSD, WWU & BYC activities. This release is binding on me and all other persons, including family members, heirs and executors. This release does not apply to gross negligence or intentional acts of WCS, BSD, WWU & BYC. All rights and responsibilities of the parties will be governed by Washington law, and any claims between the parties may be filed only in Whatcom County District Court. **My signature below means that I have read, understood, and agree to the above terms and conditions.**

PARENT/GAURDIAN SIGNATURE _____ DATE _____

PARENTS PRINTED NAME _____

PARTICIPANT SIGNATURE _____ DATE _____

PARTICIPANT PRINTED NAME _____