

BOAT:

Name: _____

Hull Color: _____

Sail #: _____

FLEET: (CIRCLE ONE)N-10 Blue Opti Red Laser
(13-15)N-10 White Opti Blue Laser
(11-12) RadialN-10 Red Opti White C420
Opti Green (7-10)**SKIPPER:**

Name: _____

Address: _____

Zip _____

Phone: _____

Date of Birth _____

Yacht Club: _____

CREW: (N-10 & C420)

Name: _____

Address: _____

Zip _____

Phone: _____

Date of Birth: _____

Yacht Club: _____

- ☒ Age limits under class rules apply to N-10 and Optimist sailors. The age limit for Laser and C420 sailors is 18 years old.
- ☒ N-10 Blue - Advanced; N-10 White - Intermediate; N-10 Red - Beginner
- ☒ Any N-10 White fleet skipper that placed 5th or higher at the previous QBRW must register for Blue fleet. Any N-10 Red fleet skipper that placed 5th or higher at the previous QBRW must register for White fleet.
- ☒ Optimist Green fleet is open to skippers who meet the following criteria:
1. Skippers must be age 14 or under on 12/31/2025
 2. Skippers may not have won more than two green fleet trophies in either 1st, 2nd, or 3rd place or any combination thereof;
 3. Skippers must not have sailed outside of green fleet.

Entry Fee \$40.00 per person

Make checks payable to: QBRWA

I (WE) HAVE READ AND UNDERSTAND THE WAIVER ON THE REVERSE SIDE OF THIS FORM. I also acknowledge the fact that I shall wear and properly secure a USCG approved PFD with an attached whistle at all times while on the water or the docks and piers of the yacht clubs.

Signatures:

Skipper _____ Parent/Guardian _____

Crew _____ Parent/Guardian _____

☐ **Permission to use photos and video from QBRW to share with media**

Please let us know what other Regattas you participated in:

☐ Lipton Cup Race☐ Town River Regatta☐ Make A Wish Regatta☐ Hingham Regatta

2025 QUINCY BAY RACE WEEK REGATTA

I, the skipper and/or owner of the yacht named on the reverse, accept full responsibility for the conduct of each member of my crew and guests during the Quincy Bay Race Week Regatta. I acknowledge that I have sole responsibility for the safety of my crew and yacht.

The Quincy Bay Race Week Association, the race committee and the participating yacht clubs are in no way to be held responsible for accidents, damage, or injury to property or to yachts, crew or guests arising from any cause during or related to any race or activities of the weekend. Weather and sea conditions must be evaluated by each skipper and his crew and each participant is responsible for determining whether it is safe for him to participate. If assistance is provided by Committee vessels and personnel, it is at the risk of the participants. **All skippers and crews must wear and properly secure a USCG approved PFD with an attached whistle at all times while on the water or the docks and piers of the yacht clubs.**

I hereby agree to all the conditions for the Quincy Bay Race Week Regatta and warrant that my crew will read and agree to the conditions. I hereby warrant that my yacht will be outfitted, equipped and handled in accordance with these conditions; that she has all the required equipment aboard; that she is seaworthy in hull, rig, and gear; that she will be competently manned.

In consideration of your accepting my Entry for the race I do for myself, my executors, my administrators and assigns waive and release any and all claims that I may have against the Quincy Bay Race Week Association, the race committee, the participating yacht clubs, their officers, directors, members, committee persons, volunteers, employees and agents, or any one or more of them or their executors, administrators, heirs, next of kin, successors, or assigns, including any and all claims for damage caused by the negligence of any of them arising out of participation or that of my yacht in the regatta and its related activities, including pre-start and post-finish operations and shore activities, together with any costs and expenses including attorney's fees that may be incurred as a result of any such claim that any officer, member of my crew or one of my guests (or the executors, administrators, heirs, next of kin, and assigns of any of them) may have to assert together with any costs and expenses including attorney's fees with respect thereto.

EMERGENCY TELEPHONE NUMBERS

SKIPPER NAME _____

In case of emergency, please call either:

Name _____ Phone # _____

Name _____ Phone # _____

Parent /Guardian Signature _____

CREW NAME _____

In case of emergency, please call either:

Name _____ Phone # _____

Name _____ Phone # _____

Parent /Guardian Signature _____