



community sailing center

lake champlain : burlington vermont

## **2009 Boat/Kayak Storage Registration**

Please use one form for each boat/kayak.

### **Boat Owner's Information**

Name \_\_\_\_\_  
Street Address \_\_\_\_\_  
City/State/Zip \_\_\_\_\_  
Home Phone \_\_\_\_\_  
Cell/WorkPhone \_\_\_\_\_  
Email Address \_\_\_\_\_  
Emergency Contact Name: \_\_\_\_\_  
Emergency Contact Phone Number: \_\_\_\_\_

### **Boat Information:**

\*Serial/Hull# \_\_\_\_\_  
Boat Type \_\_\_\_\_  
Hull Color \_\_\_\_\_  
Boat Length \_\_\_\_\_  
Beam Width \_\_\_\_\_  
Mast Length \_\_\_\_\_  
Distance from trailer tongue to stern of boat if boat is to be stored on a trailer \_\_\_\_\_

*\*All boats stored at the CSC must have a visually identifiable serial/hull number for security and organizational purposes.*



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## Storage Program Liability Waiver Form

All participants must read and sign this document and return the completed form at time of registration. If equipment is to be used by a minor, then either a parent or guardian must read and execute this form.

**Your signature indicates that you understand and agree to the terms of the waiver.**

In consideration of any and all privileges made available by Lake Champlain Community Sailing Center, Inc to me.

User's Name \_\_\_\_\_

I certify that the participant and crew are able to swim 50 yards unassisted and tread water for 5 minutes. I understand and agree to wear a Coast Guard Approved personal flotation device (PFD) and full closure shoes at all times I either in the boats or on the docks and site. I agree to assume the obligations for the expenses of repair and/or replacement of damaged program equipment that is attributable to me (or my child's) or my crew's reckless or irresponsible behavior. Furthermore, I hereby **waive any claim** I may have for damage or loss to my personal equipment or vessel involved with any activities or programs at the Center. I understand that I may be removed from the program without refund if my behavior is deemed inappropriate or unacceptable pursuant to the Center's rules, which I have read and agree to abide by them.

I agree to assume all risks and accept full responsibility associated with my participation in the Lake Champlain Community Sailing Center Programs. Lake Champlain is a dynamic body of water, upon which weather conditions may change dramatically; I/We hereby acknowledge and accept full responsibility associated with foreseen and unforeseen risks inherent in such activities. I acknowledge that sailing or paddling is a hazardous action sport, which can cause death by numerous causes including, but not limited to, drowning, hypothermia, and other severe injury. I further acknowledge that permanent disfigurement and/or disability can result from sailing due to broken bones, lacerations, contusions, skin puncture and other injuries. I hereby waive any right to claims, causes of action, damages, judgments, costs or expenses arising from this activity, acknowledgment, and agreement and agree to **indemnify, defend and hold harmless** the City of Burlington and the Lake Champlain Community Sailing Center, Inc., and the officers, directors, trustees, staff, employees and agents of these organizations or representatives ("indemnities") from any and all liability for injury or death or other loss of any kind suffered by me (or my child) or my crew in connection with this program, regardless of cause, including the negligent inaction or action of the undersigned, the indemnities or any other program participant.

I understand the contents of this Liability Waiver Form and guarantee that I (and any crew under my control) will adhere to the Center rules.

Print Participant's Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_