



HEBE RACE WEEK 2015

19th to 23rd October

ENTRY FORM

Participant's Details:

Full Name: _____ Age: _____
Address: _____ Gender: Male Female
Date of Birth: _____

Emergency Contact:

Name of Parent / Guardian: _____
Contact: (Mobile) _____ (E-mail) _____

Current sailing activities at HHYC (please tick accordingly) :

- Hebe Dragon Racing Squad: Optimist Laser 4.7
 After School Sailing: (please state name of school) _____
 Saturday Sailing: Stage 1 Stage 2 Stage 3

Membership Information:

- I am a member of * HHYC / RHKYC / ABC * *Please delete as applicable*
 I am not a member of the above clubs.

Declaration by participant:

I agree to be bound by the Racing Rules of Sailing.

I acknowledge and accept the risks associated with participation in the Hebe Race Week and waive all rights against and release the Organizing Authority and Hebe Haven Yacht Club in respect of any loss of life and injury to persons, or loss of or damage to property, suffered in connection therewith; and acknowledge that participation in the Hebe Race Week is entirely at my own risk and responsibility.

Signature of Participant: _____ Date: _____

Signature of Parent / Guardian: _____ Date: _____

Parental Consent is required for participants under 18 years old

PAYMENT

HEBE RACE WEEK Entry Fee	HHYC Member	<input type="checkbox"/>	\$3,500
	Non HHYC member	<input type="checkbox"/>	\$4,200

Extra Tickets for:

Trio Beach Bash (Monday 19 th October 2015)	HHYC Member Adult	\$100 x _____ pax	Total = \$ _____
	HHYC Member Child	\$50 x _____ pax	Total = \$ _____
	Non HHYC Member Adult	\$150 x _____ pax	Total = \$ _____
	Non HHYC Member Child	\$75 x _____ pax	Total = \$ _____

Extra Tickets for:

Halloween Party (Friday, 23 rd October 2015)	HHYC Member Adult	\$150 x _____ pax	Total = \$ _____
	HHYC Member Child	\$75 x _____ pax	Total = \$ _____
	Non HHYC member Adult	\$180 x _____ pax	Total = \$ _____
	Non HHYC member Child	\$90 x _____ pax	Total = \$ _____

Total \$ _____

Payment Method: (please tick accordingly)

- Please debit my * HHYC/RHKYC/ABC Membership A/C # _____ for the above sum.
** Please delete as applicable*

Member's Signature: _____

- I enclose Cheque # _____ for the above sum.
(Please make all cheques payable to "The Hebe Haven Yacht Club Ltd.")

- Bank Transfer to: Name of Bank: HSBC
Account Number: 019-058338-001
Name of Account: The Hebe Haven Yacht Club Ltd.

Please submit Entry Forms with Entry Fees to:

Sailing Training Centre, Hebe Haven Yacht Club
10.5 Miles Hiram's Highway, Pak Sha Wan, Sai Kung, NT, HK

By Fax: 2358 1017 or E-mail: sailing@hhyc.org.hk
Call 27190926 for enquiries

Closing date: Monday 12th October 2015