

SC MARITIME MUSEUM WOODEN BOAT SHOW.
CARDBOARD BOAT REGATTA
OCTOBER 16, 2016
REGISTRATION

NAME: _____

ORGANIZATION IF APPLICABLE:

ADDRESS: _____

CITY _____

STATE: _____ ZIP: _____

PHONE: _____

EMAIL CONTACT: NAME: _____

EMAIL ADDRESS: _____

CAPTAIN: _____ . NAME OF THE
BOAT: _____

By signing my name below and/or participating in this event, I hereby agree to abide by the safety rules and/or guidelines governing this regatta. I also hereby waive any claim against the SCMM, the City of Georgetown, or any group or individual involved in this event. If I am a minor, my guardian will sign on my behalf. By signing this form I understand that photos or video may be taken and released for advertising the Cardboard Boat Regatta in the future.

I also agree to remove from the river any part of my vessel that may become dislodged during the regatta.

SIGNED: _____ . DATE: _____

REMOVAL VERIFIED: _____ . DATE: _____

VESSEL NUMBER:

