

# 2009 Linda Elias Memorial Women's One-Design Challenge

## **OFFICIAL Entry Form**

TEAM NAME: \_\_\_\_\_

YACHT CLUB: \_\_\_\_\_

ENTRANT'S NAME: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

TELEPHONE: Cell: ( ) \_\_\_\_\_ Work: ( ) \_\_\_\_\_

EMAIL: \_\_\_\_\_ Alternate Contact Information: \_\_\_\_\_

HELMSWOMAN\* \_\_\_\_\_  
(\*Complete Charter Application))

### TEAM ENTRY FEE

**Early Entry** (Received before August 15) \$ 200  
**Regular Entry** (August 15 - October 2) \$ 250

**Total \$**

### PAYMENT OPTIONS

- Make check payable to: **LB/LA WOMEN'S SAILING ASSOCIATION**  
 Pay online with paypal, bank transfer or online credit card payment.

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### **ENTRY PROCESS**

A SIGNED ENTRY FORM, ENTRY FEE, CHARTER APPLICATION AND CHARTER DEPOSIT ARE REQUIRED FOR REGISTRATION & PARTICIPATION IN THIS EVENT.

REFUND POLICY: 50% OF ENTRY FEE WILL BE REFUNDED IF A WRITTEN REQUEST IS MADE PRIOR TO SEPTEMBER 15, 2009. NO REFUNDS AFTER SEPTEMBER 15, 2009.

**I ACKNOWLEDGE THAT I AM ENTERING THIS SERIES AT MY OWN RISK AND THAT IT IS MY SOLE AND EXCLUSIVE RESPONSIBILITY TO DECIDE WHETHER OR NOT TO SAIL OR TO CONTINUE TO RACE. I AGREE TO BE BOUND BY *THE 2009 - 2012 RACING RULES OF SAILING* AND BY ALL OTHER RULES THAT GOVERN THIS EVENT. I AGREE TO HOLD LB/LA WOMEN'S SAILING ASSOCIATION AND ITS OFFICERS AND THE LONG BEACH YACHT CLUB, AND THE LONG BEACH YACHT CLUB SAILING FOUNDATION HARMLESS OF ANY LIABILITY OF ANY NATURE WHATSOEVER FOR ACCIDENT OR INJURY TO MYSELF, MY CREW AND/OR MY GUESTS WHILE RACING OR ENGAGING IN ANY ACTIVITY RELATED TO OR CONNECTED THEREWITH. I CERTIFY THAT ALL MEMBERS OF MY CREW, INCLUDING MYSELF, ARE ABLE TO SWIM.**

Entrant Signature \_\_\_\_\_ Date \_\_\_\_\_

Send all forms and payments to: **LEMWOD**  
**4825 E. Broadway**  
**Long Beach, CA 90803**

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## CATALINA 37 CHARTER APPLICATION

TEAM NAME:

### CHARTER RATE

CHARTER DEPOSIT	\$ 200	[DUE WITH ENTRY]
CHARTER FEE [\$700/REGATTA -\$200 DEPOSIT]	\$ 500	[DUE DATE: OCTOBER 2]
SECURITY DEPOSIT/CREDIT CARD HOLD	\$ 500	[DUE DATE: OCTOBER 2]
PRE-REGATTA: SPECIAL FRIDAY PRACTICE CHARTER*	\$ 250	[*OPTIONAL/DUE OCTOBER 2]

Total \$

### PAYMENT OPTIONS

- CREDIT CARD PAYMENT -AUTHORIZATION FORM ATTACHED [MASTERCARD OR VISA]  
 MAKE CHECK PAYABLE TO: **LBYC SAILING FOUNDATION**

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HELMSWOMAN NAME:

DATE OF BIRTH:

YACHT CLUB AFFILIATION:

BOAT OWNED: YES/NO

TYPE/SIZE:

NUMBER OF YEARS SAILING:

(ATTACH SAILING RESUME IF NOT CURRENTLY ON FILE WITH THE LBYC SAILING FOUNDATION)

HAVE YOU PREVIOUSLY CHARTERED A CATALINA 37? YES/NO      DATES:

HAVE YOU HAD ANY MARINE INSURANCE CLAIMS WITHIN LAST 2 YEARS? (IF YES, PLEASE EXPLAIN)

PLEASE LIST TWO SAILING REFERENCES (UNRELATED TO YOU):

NAME	NAME
ADDRESS	ADDRESS
PHONE	PHONE
RELATIONSHIP TO YOU	RELATIONSHIP TO YOU

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**NOTE: THE \$200 CHARTER DEPOSIT IS REQUIRED TO COMPLETE THIS APPLICATION AND FOR ENTRY AND PARTICIPATION IN THIS EVENT.**

**YOUR APPLICATION MUST BE APPROVED PRIOR TO YOUR ENTRY BEING OFFICIAL. YOU WILL BE NOTIFIED OF SUCH APPROVAL. DEPOSIT WILL BE REFUNDED, ONLY IF, YOUR APPLICATION IS NOT ACCEPTED OR IF THE FLEET IS FULLY CHARTERED.**

Send all forms and payments to: **LEMWOD**  
**4825 E. Broadway**  
**Long Beach, CA 90803**

## Credit Card Authorization Form

I hereby authorize the Long Beach Yacht Club Sailing Foundation to charge my credit card for the following charter expenses:

- Charter Deposit..... \$ 200
- Regatta Charter Fees (October 17-18)..... \$ 500
- Charter Security Deposit..... \$ 500
  
- Friday, October 16 – Special Practice Charter..... \$ 250

Print Name (As appears on card): \_\_\_\_\_

Credit Card Number \_\_\_\_\_ Expiration: \_\_\_\_/\_\_\_\_/\_\_\_\_

Mastercard     Visa    Verification Code (last three digits on back of card): \_\_\_\_\_

Billing Address: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

**RETURN SIGNED AUTHORIZATION FORM WITH /CHARTER APPLICATION  
LEMWOD, 4825 E. Broadway, Long Beach, CA 90803**

### **CHARGE SCHEDULE:**

THE CHARTER DEPOSIT [\$200] WILL BE CHARGED IMMEDIATELY TO RESERVE YOUR CATALINA 37.

REGATTA CHARTER FEES [\$500] WILL BE CHARGED ON OCTOBER 2, 2009

SPECIAL FRIDAY PRACTICE CHARTER FEE [\$250] WILL BE CHARGED ON OCTOBER 2, 2009

CHARTER SECURITY DEPOSIT [\$500] WILL BE CHARGED ONLY IF THE YACHT IS RETURNED WITH DAMAGE OR IF EQUIPMENT LOSS OCCURED DURING POSSESSION OF THE YACHT. A WRITTEN DAMAGE/EQUIPMENT LOSS REPORT WILL BE PROVIDED BY THE CHARTER MANAGER.

ANY QUESTIONS?  
CONTACT JUDY-RAE KARLSEN AT 562-355-8500