

Know All Men By These Presents:

THAT I, _____, am the parent or guardian of _____
(parent's name - printed) (child's name - printed)
who has made an application for a Junior Membership in the HAMPTON YACHT CLUB, INCORPORATED.

IN CONSIDERATION of the acceptance of _____ as a Junior Member in the Hampton Yacht Club,
(Child's name)

Incorporated, I hereby release and forever discharge the Hampton Yacht Club, Incorporated, its officers, members, guests, employees, successors and assigns from all manner of action, causes of actions, claims, demands for damages, (including personal injury or death), in law, or equity, by reason of _____ being a Junior Member of the said Hampton Yacht Club,
(Child's name)

Incorporated, or entering into any activity of the Club or using the Yacht Club property or other property connected with the Hampton Yacht Club, Incorporated while a Junior Member of the same; and I do further agree to indemnify and save harmless the said Hampton Yacht Club, Incorporated, from any claims, loss or damages sustained by it as a result of the aforesaid activities of my child or ward. Further, I agree to indemnify and save harmless the said Hampton Yacht Club, Incorporated for any expenses including costs and reasonable attorney fees arising out of any loss or claim for damages sustained or caused by said Junior Member. I acknowledge that sailing in the activities of the Junior Program are inherently dangerous and I assume the risk of any injury or loss incurred in such activities.

THIS RELEASE AND INDEMNITY AGREEMENT shall continue in force from year to year so long as my said child or ward shall be a Junior Member in the said Hampton Yacht Club, Incorporated.

As used herein the term Hampton Yacht Club, Incorporated includes the Officers Directors, Members, Instructors and Employees of the Hampton Yacht Club, Incorporated.

IN WITNESS WHEREOF I have hereto set my hand and seal this day of, 2010.

_____ Parent or Guardian

MEDICAL RELEASE

Authorization for Emergency Medical Treatment:

Let it be known that I, _____ am legal resident of _____
now residing at _____ am the lawful parent/guardian and have full custody of

That I have made, constituted, and appointed, and by these presents do make, constitute and appoint personnel of the Hampton Yacht Club Junior Sailing Program or Hampton Yacht Club to act for me and in my name place, and stead to perform any and all acts hereinafter set down, as fully to all intents and purposes as I might or could if personally present, with full power of substitution and revocation, hereby ratifying and confirming all the sail personnel shall do or cause to be done by virtue of this power, to wit:

AUTHORIZE ANY AND ALL MEDICAL AND HOSPITAL CARE AND TREATMENT, INCLUDING MAJOR SURGERY, DEEMED NECESSARY BY A DULY LICENSED PHYSICIAN OR DULY LICENSED STAFF PHYSICIAN AT ANY MEDICAL FACILITY WHICH IS NECESSARY FOR THE HEALTH AND WELL-BEING OF MY CHILD NAMED HEREIN.

The terms of this appointment becomes null and void after November 15, 2010,

In witness whereof, I have heron set my hand and seal this (day) ____ of (month) _____, 2010.

(Signature of Parent/Guardian)

(Signature of Parent/Guardian)

Child's Medical Information or history (such as allergies, medications, etc.) _____

Child's medical doctor: _____ Doctor's address: _____

Doctor's phone number: _____

IN CASE YOU CANNOT BE REACHED, PLEASE PROVIDE A BACK-UP NAME AND PHONE NUMBER TO BE USED IN CASE OF AN EMERGENCY:

NAME: _____ PHONE NUMBER: _____

THESE RELEASE FORMS MUST BE TURNED IN BEFORE YOUR CHILD IS ALLOWED START THE HYC JUNIOR PROGRAM