

# 2016 USRowing Registered Regatta Application

## Using USRowing Coverage

Name of Regatta: \_\_\_\_\_

Dates: \_\_\_\_\_ Member Organization ID #: \_\_\_\_\_

Member Organization Name: \_\_\_\_\_

Which online registration are you using:  RegattaCentral  Other  None

If you are not using RegattaCentral, please submit a list of all anticipated attending teams to [members@usrowing.org](mailto:members@usrowing.org).

Regatta Director: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Website: \_\_\_\_\_ Email Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Body of Water: \_\_\_\_\_ Entry Deadline: \_\_\_\_\_

Number of Competitors: \_\_\_\_\_ Race Distance: \_\_\_\_\_ Registration Fee: \_\_\_\_\_

Type of Race:  Sprint  Head  Open Water  Other

Competitor Categories:  College  Junior  Masters  Adaptive  Other

Chief Referee: \_\_\_\_\_ Chief Referee Email: \_\_\_\_\_

Has the Chief Referee been officially notified?  Yes  No

Number of Launches: Referee \_\_\_\_\_ Reserve \_\_\_\_\_ Safety/Rescue \_\_\_\_\_ Course Patrol \_\_\_\_\_

Will the body of water be closed to other boat traffic during competition?  Yes  No

If not, how will traffic be controlled? \_\_\_\_\_

Method for obtaining weather updates? \_\_\_\_\_

Are any rule exceptions or amendments being requested for this event?  Yes  No

If "Yes," please list exceptions: \_\_\_\_\_

Do you have a Hold Harmless or Indemnification Contract with an individual or entity for this event? Are you agreeing to add another party as an additional insured such as a park, recreation center, or public entity?

Yes  No (If yes, please attach a copy of the contract(s).)

Please request additional insureds at <http://usrow.us/RequestRoehrsCert> or phone 888-467-3557.

Oh behalf of the organizing committee, I have read and understand all the conditions and requirements for hosting a registered regatta. These requirements will be met.

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

Method of Payment:

Visa  Mastercard  Discover  Check  # \_\_\_\_\_

Credit Card # \_\_\_\_\_ Exp Date: \_\_\_\_\_

Please email this application to [members@usrowing.org](mailto:members@usrowing.org) or fax to 609-924-1578.

**REMINDER: IF YOU ARE NOT USING ONLINE REGISTRATION TO MANAGE YOUR REGATTA, PLEASE PROVIDE A TENTATIVE LIST OF COMPETING ORGANIZATIONS ALONG WITH THIS APPLICATION.**