



23rd Annual Juana Good Time Regatta

Navarre Beach, FL

850-939-2130 _ www.juanaspagodas.com

September 6, 7, 8, 2013

Check and fill-in all that apply

Boat Name: _____

Boat Type: _____ Size: _____ Sail #: _____ Rating: _____

Beach Cat: _____ Tri: _____ Cruiser: _____ Co-ed: _____ ****Hobie Timed Beach Races**

***Races for sailors without a boat. Hobie Waves provided by Juana's. Single Handed Package*

Shirt request (indicate quantity): S _____ M _____ L _____ XL _____ XXL _____ Ladies L _____

First consideration will be given to entries received by Sept. 1; all other shirt requests will be first come first serve.

Registration Packages (mark all that apply)

QNTY	Package	Before Aug. 31	After Aug. 31	Included
	2 Person Crew	\$60	\$70	2 shirts; 2 wristbands; trophies
	Single Handed or Extra Crew	\$35	\$40	1 shirt; 1 wristband; trophies
	Non-racers	\$35	\$40	1 shirt; 1 wristband

Make checks payable to: Juana's Inc

Mail to: Juana's Good Time Regatta; Attn: Juana Rudzki 1469 Alabama St., Navarre, FL 32566

Captain and Crew Information

Complete ALL information below. In consideration of being permitted to enter this regatta and being fully knowledgeable of the risks of sailing as a competitive sport, I agree voluntarily to assume the risk of participation and hold harmless those sponsoring and aiding the Regatta from any liability of any nature whatsoever for any accident or injury to myself, my guest, or my boat. I mutually agree with other contestants to abide by all rules and regulation governing this Regatta. I certify that my boat will be equipped with lifesaving devices required by law, for each person on board, as well as, any other equipment required by USYRU or Class Rules and that no crew member will be allowed to participate unless able to swim. I grant permission to all of the foregoing to use any photographs, motion pictures, recordings or any other record of this event for any legitimate purpose. My signature indicates that I have read and agree to this waiver. **Race entry fee includes 6.5% Florida sales tax.**

1 Captain _____

Signature _____

Email _____

Street _____

City _____ STATE _____ ZIP _____

2 Crew _____

Signature _____

Email _____

Street _____

City _____ STATE _____ ZIP _____

3 Extra Crew _____

Signature _____

Email _____

4 Extra Crew _____

Signature _____

Email _____

(Add additional crew on back.)

For official Juana use only: Check _____ Cash: _____ CC: _____ Emp _____ Date _____

Indicate additional payments below.