



**ACKNOWLEDGEMENT OF RISK AND ASSUMPTION OF PERSONAL RESPONSIBILITY**

I understand that sailing is an active, physical activity. Though mild, during my participation in the sailing experience I will be exposed to above normal risks. I understand that although GEL and it's sailing school partners have taken precautions to provide equipment and qualified instructors, it is impossible for them to guarantee absolute safety. Also, I understand that I share the responsibility for safely during the event and I assume that responsibility. I have accepted responsibility to verify with my physician that I have no physical or psychological problems that would prohibit my participating in this event. I agree to comply with the instructions and directions of staff during the event.

Name (Please Print) \_\_\_\_\_  
Company \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_

Do you have any physical conditions that would impact your ability to participate in the sailing instruction or team sailing activities? YES  NO

If yes, please describe: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Do you have any prior sailing experience? YES  NO

If yes, please describe: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I understand that photographs may be taken of the team in action today and uploaded to [www.gelcorp.com](http://www.gelcorp.com) where they will be viewable by family and friends. Pictures are occasionally featured in Gel's newsletters and blog postings. By providing my email address below, I'm requesting notification of photo availability online. I will notify Gel if I'd like a specific photograph removed from [www.gelcorp.com](http://www.gelcorp.com).

My preferred email address is \_\_\_\_\_@\_\_\_\_\_

Participant's Signature \_\_\_\_\_ Date \_\_\_\_\_