



FIRST NAME

LAST NAME

SAIL NUMBER (if any)

Post all entries to:

34C Wairau Rd
Oakura
Taranaki
New Zealand
4314

EMAIL

Additional Meal Ticket \$20

COUNTRY

CONTACT PHONE

REGISTRATION PAID \$75 NZD

CASH

CHEQUE

BANK DEPOSIT

Make **Cheques** payable to: Taranaki Windsurf Club

Make **Bank Deposits** to: 15-3942-0645156-00

Code: TWC10

Reference: Your Last Name

Particulars: Your First Name

I acknowledge that the Taranaki Wave Classic is a high-risk activity and that I will participate in this event and all associated activities solely in reliance on my own judgment. I hereby waive any rights I may have against the event organisers and anyone else involved in the promotion, administration or participation of the event, and I acknowledge that they shall have no liability for any personal or property damage I may sustain during or in connection with the Taranaki Wave Classic.

SIGNED

DATE

I am the parent of the person who is to participate in this event and understand that by signing this form, I agree to the waiver and acknowledge that, which is mentioned above.

SIGNED by parent (if under 18 at 22.Oct 2010)

DATE

