



Guam Kayak and Canoe Federation
P.O. Box 21809 GMF, Guam 96932

Hafa Adai!

Thank you for your interest in participating in the second **Guam National Long Distance Championship!**

- The Distance Championship will be held on **Saturday, November 22, 2003**.
- It is a **10 mile course**; a triangle course from Hagatna Boat Basin and back.
- The race is **Iron** (6 paddlers/no water changes).
- Teams must provide their own canoes. Contact Joe Nowell (476-8799) if you need assistance in securing a canoe.
- Registration fee is \$80.00.
- This Championship is open to all local crews.
- Team Check-in will start at 8am; Race will start at 9am.
- There will be an awards ceremony and GKCF Membership Meeting that day after the race.

The Guam Kayak and Canoe Federation (GKCF) has put together this packet to ease the registration process. Included here are:

- 1) **OC6 Distance Event Registration** – please complete this form. This race is IRON but you may include up to three alternates on your roster. Your team of six will check in at the Event Registrar on race day. Also, information about the canoe you are racing is also required on this form.
- 2) **Parental & Coach Permission Form** (please copy as needed) – 16 to 18 year old paddlers need to get permission to participate in the Open Division. Please complete one form per paddler.
- 3) **GKCF Waiver, Indemnification and Release of Liability** (6 copies) – Each member of your team is required to complete and sign this form. The cost to cover your team of six who will race on race day is included in the registration fee.

Please submit all completed forms plus your \$80.00 registration fee to the Event Registrar at SOAR in Tamuning. Deadline for registration is at **5pm Thursday, November 20, 2003**. Late registration will cost \$100 and will end on **5pm Friday, November 21, 2003**. Registration will not take place on race day.

For more information, please contact your Club's GKCF Representative or call Rick Appleton, GKCF President, at 727-7105.

Thank you for your commitment to outrigger canoeing. We hope your experience in this upcoming championship is a good one. Good luck.

GKCF Board



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OC6 LONG DISTANCE EVENT REGISTRATION

This form must be completed and submitted to the Registrar not less than two (2) days prior to the race date. Late fees may be assessed if submitted late. GKCF Rules apply.

HOST: **GUAM KAYAK AND CANOE FEDERATION**
RACE NAME: **GUAM NATIONAL OC6 DISTANCE CHAMPIONSHIP**
RACE DATE: **NOVEMBER 22, 2003**

CLASSIFICATION: MEN ___ WOMEN ___ MIXED ___

DIVISION:		CANOE CLASS:	
OPEN (19+) ___	JUNIOR (10-18) ___	OPEN ___	FIJIAN ___
MASTERS (35+) ___	SR. MASTERS (45+) ___	GALAIDE II ___	

TYPE OF CANOE: _____ NAME OF CANOE: _____

AMA COLOR: _____ HULL COLOR: _____ SKIRT COLOR: _____

TEAM NAME: _____ AFFILIATED CLUB: _____

TEAM CONTACT NAME & NUMBER: _____

For paddlers 16-18years old & racing in the open division, complete the Parent & Coach Permission Form

Paddler Name (print)	GKCF PADDLER NO. (ADMIN USE ONLY)	RACE SIGN-IN (ADMIN USE ONLY)
1. Team Leader:		
2.		
3.		
4.		
5.		
6.		
7. Alternate		
8. Alternate		
9. Alternate		

ADMIN USE: \$80 Fee. Initial when Paid _____	ADMIN USE: GKCF CANOE # _____
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PARENTAL & COACH PERMISSION FORM

This form is to be completed and submitted to Event Registrar upon team registration.

ATTENTION: EVENT REGISTRAR

I, _____
Print full name

OF _____
Address

HEREBY GIVE PERMISSION FOR MY CHILD _____ GKCF ID _____

WHO WILL BE SIXTEEN OR OVER IN THE RACE YEAR OF COMPETITION, TO COMPETE IN **OPEN DIVISION** OUTRIGGER CANOE EVENTS, SANCTIONED BY THE GKCF.

I UNDERSTAND THAT THE COACH/TEAM LEADER OF THE DIVISION MUST ALSO AGREE THAT MY CHILD TAKES PART IN OPEN DIVISION EVENTS.

I AM AWARE THAT MY CHILD MUST TURN SIXTEEN OR OVER IN THE RACE YEAR OF COMPETITION.

PARENT OR GUARDIAN SIGNATURE: _____

DATE: _____

COACH/TEAM LEADER APPROVAL:

I, _____
Print full name

OF _____
Print full name of club

GIVE PERMISSION FOR THE PERSON NOMINATED ON THIS FORM TO TAKE PART IN OPEN DIVISION EVENTS SANCTIONED BY GKCF.

SIGNATURE: _____

DATE: _____



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GKCF INDEMNITY FORM

FULL NAME: _____

ADDRESS: _____

PHONE: _____ EMAIL: _____

NEXT OF KIN: _____ NEXT OF KIN PHONE: _____

AFFILIATED CLUB: _____

EVENT: _____

TEAM: _____

I realize there is a risk of injury, possibly even serious injury or death, from participating in the sport of outrigger canoeing, but I am willing to accept this and participate completely at my own risk. I agree to hold harmless GKCF, its board members, its officials and its registered members from liability.

Signed: _____ Date: _____

PARENTAL/GUARDIAN CONSENT UNDER 18 YEARS:

Parent/guardian full name: _____

Parent/guardian Signature: _____

