ROUND SALTSPRING RACE

CREW EMERGENCY CONTACT LIST

SAIL NUMBER_____ YACHT NAME_____ DATE_____

The Organizing Authority will protect personal information in accordance with the Freedom of Information and Protection of Privacy Act. Information is gathered only for the purpose of communicating with authorities in the event of an emergency.

NAME	EMAIL (optional)	EMERGENCY CONTACT PERSON	EMERGENCY PHONE NO.
Person in Charge			

A COMPLETED crew emergency contact list MUST be submitted at Registration in order to receive Registration Package.

Saltspring Island Sailing Club
152 Douglas Road, Salt Spring Island, BC V8K 2J2