

CANADIAN MASTERS WINDSURFING ASSOCIATION
CMWA SPRING GET-TOGETHER & CLINIC
May 27-29, 2011

Burgess Enclave, Port Bolster, Lake Simcoe

Looking for a fun-filled weekend with lots of sailing and great snacks Friday night hosted by the CMWA. Bring your favourite dish for Saturday night's potluck dinner. Your culinary expertise should delight all the participants. I expect that there will be enough leftovers for lunch the next day!

Jeff Borgmeyer, Tropical North, Barrie and Geoff Mitchinson, his sidekick, are returning to coach. Both seasoned coaches and windsurfers will facilitate on water training for the two days. There will be plenty of advice from sailing techniques to exercises to improve your sailing. If you do not own equipment, we will bring a limited number of boards on a first come first serve basis. You may need to share!

We will have special guests from McCallum Massage. Gord will educate us on ways to better health including some hands on massages after he finished sailing of course!

Burgess Enclave is located on beautiful Lake Simcoe in Port Bolster. There is plenty of grassy rigging area with access to the sandy shallow beach. It is ideal for all levels of sailors.

COST

Spring Get-Together & Clinic with lodging in the cottages:

\$110 current CMWA members \$155 for non-members (includes 2011 CMWA membership)

Youth Clinic with lodging in the cottages:

\$60 current CMWA members \$ 85 for non-members (includes 2011 CMWA membership)

Clinic only (no lodging) or Lodging only for guests:

\$60 for current CMWA members \$105 for non-members (includes 2011 CMWA membership)

What to bring? Bring your own bedding (sleeping bag and pillow), toiletries, food for lunch and a potluck dish for Saturday night dinner. You'll need a wetsuit, lifejacket, water shoes, hat, sunscreen and windsurfing gear. Musical instruments are a must.

For information contact: surfit@sympatico.ca or call 905-953-8331 or check the web: www.windsurf.ca click on the events tab at top of page

**CANADIAN MASTERS WINDSURFING ASSOCIATION
CMWA SPRING GET-TOGETHER & CLINIC 2011 REGISTRATION FORM**

Name: _____ Age: _____

Address: _____

City: _____ P.C. _____

Phone: _____

Email: _____

Clinic with lodging in the cottages:

- ___ \$110 current CMWA members
___ \$155 for non-members (includes 2011 CMWA membership)

Youth Clinic with lodging in the cottages:

- ___ \$60 current CMWA members
___ \$85 for non-members (includes 2011 CMWA associate membership)

Clinic Only or Lodging for Guests:

- ___ \$60 for current CMWA members
___ \$105 for non-members (includes 2011 CMWA membership)

Sailing Level: Beg. ___ Nov. ___ Inter. ___ Adv. ___

Do you have access to your own equipment? Yes No

What do you want to learn?

Return registration by May 23, 2011 to:

Stephanie Todd, CMWA Social/Women's Director
96 Colony Trail Blvd.
Holland Landing, ON L9N 1E3

For information contact: surfit@sympatico.ca or call 905-953-8331

CANADIAN MASTERS WINDSURFING ASSOCIATION

CMWA SPRING GET-TOGETHER & CLINIC 2011

WAIVER FORM

Name: _____ **Age:** _____

Address: _____

City: _____ **P.C.** _____

Phone: _____ **Email:** _____

Waiver:

In consideration of the Canadian Masters Windsurfing Association (referred to as "the CMWA") accepting my registration and permitting me to participate in the **CMWA Spring Get-Together & Clinic** (referred to as "CMWA Events") for the period from **May27-29, 2011** at Burgess Enclave, Lake Simcoe, Port Bolster ON.

I, _____, for myself, my heirs, executors, administrators and assigns release the CMWA, its principals, instructors, agents, servants and any other person or organization assisting the CMWA Event, from any and all claims, demands, damages, actions, or causes of action arising out of or in consequence of any loss, injury, or damage to my person or property incurred while attending at, participating in or traveling to or from the CMWA Event not withstanding that any such loss, injury or damage may have arisen by reason of negligence of the CMWA, its principals, instructors, agents, servants or any other person or organization assisting the CMWA Event.

I state that I am in proper physical condition to participate in the CMWA Event, which I understand and I am fully aware of that participation could, due to the nature of the sport, result in physical injury to me or damage to my property and involve risks that could result in death.

I further agree to indemnify the CMWA, its principals, instructors, agents, servants and any other person or organization assisting the CMWA Event, from any claims or demands which might be made against them arising out of or in consequence of my attendance at or participation in the CMWA Event.

I am at least 18 years of age and execute this Release and Waiver of my own free will, fully understanding its meaning and effect, and knowing that the CMWA will not accept me as a participant in the CMWA Event without the release and indemnification that I am hereby giving.

SIGNED: _____ DATE: _____

PRINT NAME

WITNESS: _____ DATE: _____

PRINT NAME

I, _____ give permission to the CMWA to use my photo and name in its newsletters or website. _____ (Initial)