

CANADIAN MASTERS WINDSURFING ASSOCIATION

WOMEN'S & YOUTH SPRING WINDSURFING CLINIC June 17-19, 2011

Burgess Enclave, Port Bolster, Lake Simcoe

The CMWA is hosting its annual weekend clinic for women as well as a youth development clinic. The clinics this year will be focused on board handling skills. There will be more on water time with coaching from expert windsurfers, Head Coach, Dan Thompson returns along with assistant coaches, Andrée Gauthier, Stephanie Todd and Bob Shuttleworth. We will offer tips for all levels of windsurfers from beginner to advanced sailors. All ages are welcome.

Whether you have windsurfed before or have never stepped on a board, this weekend will allow you to learn and practise in the company of others who love the sport. Bring your own windsurfing equipment (borrowed or rented). It will be a fun filled social weekend for everyone.

There may be special guests to work with you before or after being on the water.

The 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

Includes weekend lodging in the cottages:

\$100 for current CMWA members \$145 for non-members (includes CMWA membership)

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

Saturday Clinic **ONLY** (no lodging) June 18:

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

\$ 40 for current youth members \$ 65 for non-members (includes CMWA membership)

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

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.

CMWA WOMEN'S & YOUTH WINDSURFING CLINIC 2011
REGISTRATION FORM

Name: _____ Age: _____

Address: _____

City: _____ P.C. _____

Phone: _____

Email: _____

____ Enclosed is \$100. Accommodations /Clinic. **Current CMWA 2011 member.**

____ Enclosed is \$145 Accommodations /Clinic + CMWA membership.

____ Enclosed is \$ 60 Saturday Clinic only. **Current CMWA 2011 member.**

____ Enclosed is \$105 Saturday Clinic only + CMWA membership.

____ Enclosed is \$ 60 Youth accommodations/Clinic. **Current CMWA 2011 member**

____ Enclosed is \$ 85 Youth Accommodations/Clinic + CMWA Membership

____ Enclosed is \$ 40 Youth Saturday Clinic Only **Current CMWA 2011 member**

____ Enclosed is \$ 65 Youth Saturday Clinic Only + CMWA Membership

Return registration to by June 9th, 2011:

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 WOMEN'S & YOUTH SPRING 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 Women's & Youth Spring Clinic** (referred to as **CMWA Event**) for the period from **June 17-19, 2011** at the 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)