



## NW-0 REGISTRATION FORMS/INSTRUCTIONS

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**These completed and signed forms are required at the time of registration on 'Oahu:**

- NW-1 Entry Application
- NW-2 Crew List
- NW-3 Na Wahine O Ke Kai Waiver and Release of Liability and Promotional Rights
- NW-4 Escort Boat Application/Waiver
- NW-5 Emergency Contact Form
- NW-6 Hilton Hawaiian Village Waiver
- NW-7 HCRA Waiver (to be completed by out of state participants)
- NW-8 Junior/Masters 55 Participation Requirement Form (Due by Sept 12)

### **Instructions:**

1. Shipping fee due September 16, 2016. Entry fee due September 19, 2016. There will be a \$100 late fee for any payment not received by the deadline.
2. All forms in this registration package have to be properly completed, signed and submitted at registration on September 19, 2016 at the location given in the event information.
3. Race fee is \$800. Shipping fee is \$200. Please write checks to: Na Wahine o Ke Kai.

**All other forms can be turned in at registration or mailed to the Registrar no later than September 19, 2016. For questions related to registration forms please contact:**

Registrar:  
Carol Young  
98-120 Lipoa Pl. #301  
Aiea, Hi 96701  
**or** Email: [jcyoung76@hotmail.com](mailto:jcyoung76@hotmail.com)  
**or** Phone: 808-330-3434



**HAWAIIAN AIRLINES**

*Na Wahine O Ke Kai*

**NW1**

**2016 ENTRY APPLICATION**

CLUB NAME \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**CONTACT PERSON:** \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip/Country Code \_\_\_\_\_

Cellular \_\_\_\_\_ Email \_\_\_\_\_ Fax \_\_\_\_\_

**CHECK APPROPRIATE DIVISION**

<b>16-18</b> (12 Paddlers)	<b>OPEN</b> (10 Paddlers)	<b>40 +</b> (10 Paddlers)	<b>50</b> (12 Paddlers)	<b>55+</b> (12 Paddlers)
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**CANOE INFORMATION**

NAME OF CANOE \_\_\_\_\_

COLOR: Hull \_\_\_\_\_ Manu \_\_\_\_\_ Canvas \_\_\_\_\_

Owner of Canoe: \_\_\_\_\_ Cellular \_\_\_\_\_

Address \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_



# HAWAIIAN AIRLINES

## *Na Wahine O Ke Kai*

**NW-2**

### CREW LIST 2016

Canoe # \_\_\_\_\_

CREW NAME \_\_\_\_\_ #/Color \_\_\_\_\_

DIVISION: KOA \_\_\_\_\_ NON-KOA \_\_\_\_\_

CLASSIFICATION: Juniors (16-18) \_\_\_\_\_ OPEN \_\_\_\_\_ Masters 40+ \_\_\_\_\_  
Masters 50+ \_\_\_\_\_ Masters 55+ \_\_\_\_\_

	<b>PADDLER NAMES: (Please print)</b>	<b>Na Wahine Waiver</b>	<b>Hilton Waiver</b>	<b>ID</b>	<b>Emer- gency Conta- ct</b>	<b>Out of state HCRA Waiver</b>	<b>Junior Parent ID</b>
1	_____	_____	_____	_____	_____	_____	_____
2	_____	_____	_____	_____	_____	_____	_____
3	_____	_____	_____	_____	_____	_____	_____
4	_____	_____	_____	_____	_____	_____	_____
5	_____	_____	_____	_____	_____	_____	_____
6	_____	_____	_____	_____	_____	_____	_____
7	_____	_____	_____	_____	_____	_____	_____
8	_____	_____	_____	_____	_____	_____	_____
9	_____	_____	_____	_____	_____	_____	_____
10	_____	_____	_____	_____	_____	_____	_____
11	_____	_____	_____	_____	_____	_____	_____
12	_____	_____	_____	_____	_____	_____	_____

CANOE NAME \_\_\_\_\_ OWNER \_\_\_\_\_

COLOR: Hull \_\_\_\_\_ Manu \_\_\_\_\_ Canvas \_\_\_\_\_

Coach (print) \_\_\_\_\_ Coach Contact Phone \_\_\_\_\_ Email \_\_\_\_\_

Waivers/ID checked by: \_\_\_\_\_ Date \_\_\_\_\_ / \_\_\_\_\_ **PAID \$** \_\_\_\_\_ check \_\_\_\_\_ cash \_\_\_\_\_ Date \_\_\_\_\_

(official use only)

- Changes to this form may be made at registration on Molokai by Noon, September 24, 2016.
- HCRA cards are acceptable for ID's



**HAWAIIAN AIRLINES**

*Na Wahine O Ke Kai*

**NW-3**

**NA WAHINE O KE KAI WAIVER AND RELEASE OF  
LIABILITY AND PROMOTIONAL RIGHTS**

**A) ADULT WAIVER AND RELEASE OF LIABILITY**

In consideration of being allowed to participate in any way in Hawaiian Canoe Racing Association, Na Wahine o Ke Kai, and its member organizations athletics/sports programs, and related events and activities, the undersigned:

1. Agree that prior to participating, they each will inspect the facilities and equipment to be used and if they believe anything is unsafe, they will immediately advise their coach or supervisor of such condition(s) and refuse to participate.
2. Acknowledge and fully understand that each participant will be engaging in activities that involve risk of serious injury, including permanent disability and death, and severe social and economic losses which might result not only from their own actions, inactions or negligence, but the actions, inactions or negligence of others, the rules of play, or the condition of the premises or of any equipment used. Further, that there may be other risks not known to us or not reasonably foreseeable at this time.
3. Assume all the foregoing risks and accept personal responsibility for the damages following such injury, permanent disability or death.
4. I have disclosed to my coach that I have no medical condition, ailment of disability (physical/mental), which would affect my ability to paddle competitively, be water safe, and survive any risks or hazards arising out of the competition.
5. Release, waive, discharge and covenant not to sue Hawaiian canoe Racing Association, Na Wahine o Ke Kai, it's member associations, it's affiliated clubs, their respective administrations, directors, agents, coaches and other volunteers or employees of the organization, other participants, sponsoring agencies, sponsors, advertisers and it's applicable, owners, and lessors of premises used to conduct the event, all of which are hereinafter referred to as "releasees", from demands, losses or damages on account of injury, including death or damage to property, caused or alleged to be caused in whole or part by the negligence of the releasee or otherwise.

**B) PROMOTIONAL RIGHTS WAIVER**

The undersigned grants Na Wahine O Ke Kai and its representatives permission to telecast, show and/or print and publish any and all pictures taken of me or the crew collectively in conjunction with the Na Wahine O Ke Kai Race, the undersigned releases Na Wahine O Ke Kai and its representatives all rights to publication and/or other use of aforementioned pictures for their brochures, or other promotional and/or other printed material without remuneration.

**AFFIRMATION**

THE UNDERSIGNED HAVING READ THE ABOVE WAIVER AND RELEASE, UNDERSTAND THAT THEY HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT AND SIGN IT VOLUNTARILY.

Print Participants Name: \_\_\_\_\_

Participant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Canoe Club: \_\_\_\_\_ Association: \_\_\_\_\_

**If a Minor, Printed Name of Custodial Parent of Guardian:** \_\_\_\_\_

Signature of Custodial Parent or Guardian: \_\_\_\_\_ Date: \_\_\_\_\_



**HAWAIIAN AIRLINES**

*Na Wahine O Ke Kai*

**NW-4**

**ESCORT AND/OR AUXILIARY BOAT WAIVER**

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**1) BOAT OWNER OPERATOR**

PRINTED NAME OF OWNER/OPERATOR OF VESSEL: \_\_\_\_\_

Proof of Captain's license and USCG Certification (attach copies): \_\_\_\_\_

Operator License #: \_\_\_\_\_ Cellular # \_\_\_\_\_

Name of Helper 1:

Name of Helper 2:

Print Name \_\_\_\_\_

Print Name \_\_\_\_\_

**2) PARTICIPATION:**

Will serve as official \_\_\_ escort \_\_\_ boat for Women's Molokai to Oahu Race? \_\_\_yes/no\_\_\_

Escort for \_\_\_\_\_ Canoe club

**3) BOAT INFORMATION: (Please complete this section accurately and completely)**

TYPE OF BOAT: (ie: Boston Whaler) \_\_\_\_\_ Size \_\_\_\_\_ HA # \_\_\_\_\_

NAME OF BOAT: \_\_\_\_\_ Color \_\_\_\_\_

**4) TYPE OF RADIO COMMUNICATION:** (Marine Band two way radio must be mounted on boat)

Do you have a **MOUNTED VHF RADIO** on your boat? Yes \_\_\_\_\_ No \_\_\_\_\_

ALL BOATS ARE REQUIRED TO HAVE A MOUNTED VHF RADIO.

(CREW WILL BE DISQUALIFIED IF ESCORT BOAT DOESN'T HAVE A MOUNTED VHF RADIO.)

**NO HAND-HELD RADIOS ALLOWED!**

**5) REQUIRED COVERAGE:**

**PROTECTION AND INDEMNITY** (including Primary Collision Liability):

**LIMIT OF LIABILITY:** \$300,000

**Insurance Carrier:** \_\_\_\_\_ **Policy Number:** \_\_\_\_\_

**Policy Term:** \_\_\_\_\_

**(ATTACH CERTIFICATE OF INSURANCE TO APPLICATION)**



**HAWAIIAN AIRLINES**

*Na Wahine O Ke Kai*

## **ESCORT AND/OR AUXILIARY BOAT WAIVER**

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### **2016 WAIVER OF RESPONSIBILITY**

In consideration of my participation in the Na Wahine O Ke Kai 2016 canoe race, as an escort/auxiliary boat, I, the owner and operator of the vessel/escort boat listed, recognizing and understanding the risks attached to such participation in said canoe race, assume all and every risk of personal injury or damage to myself, my property and for the crew, and therefore agree to hold harmless, Hawaiian Canoe Racing Association, and Na Wahine o Ke Kai

\_\_\_\_\_ Canoe Club, and all sponsors, their officers, agents, members, officials and participants of said race from any and all claims for personal injury to myself, my property or my crew, for any injury or damage, arising out of my participation in said canoe race, regardless of cause. In addition, I warrant that I am competent to act as a skipper/captain of this vessel/escort/motorboat, and the vessel/escort/ motorboat being used in this event is seaworthy. I further agree that I will accept the directions of race officials and the official (if any) assigned to my vessel.

### **AFFIRMATION**

We, the undersigned, agree with all the above and fully understand that affixing our signatures to the Waiver Form we affirm to be true.

I/We hereby warrant that the information provided above is complete and accurate to the best of my/our knowledge and belief, and it is our understanding that underwriters shall rely upon the information and representations listed above heavily in determining the acceptability of coverage. It is further understood that any misrepresentation or omission may constitute grounds for immediate cancellation and denial of claims, if any.

OWNER \_\_\_\_\_ DATE: \_\_\_\_\_  
AUTHORIZED SIGNATURE

Helper 1 \_\_\_\_\_ DATE: \_\_\_\_\_  
AUTHORIZED SIGNATURE

Helper 2 \_\_\_\_\_ DATE: \_\_\_\_\_  
AUTHORIZED SIGNATURE

**OWNER/OPERATOR AND ANY ASSOCIATED HELPERS MUST EACH SUBMIT NA WAHINE WAIVER, HILTON WAIVER, AND EMERGENCY CONTACT FORMS.**



**HAWAIIAN AIRLINES**

*Na Wahine O Ke Kai*

**NW-5**

**EMERGENCY CONTACT FORM**

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Club/Crew Name \_\_\_\_\_

**PARTICIPANT'S NAME:** \_\_\_\_\_ **DOB:** \_\_\_\_\_

Street Address: \_\_\_\_\_ ( Suite # ): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work: \_\_\_\_\_ Cell: \_\_\_\_\_

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Medical Insurance Coverage: HMSA \_\_\_\_\_ KAISER \_\_\_\_\_ HMA \_\_\_\_\_ Other: \_\_\_\_\_

Physician's Name: \_\_\_\_\_ Hospital: \_\_\_\_\_

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**IN CASE OF EMERGENCY, PLEASE CONTACT:**

1) **NAME:** \_\_\_\_\_ **Relationship:** \_\_\_\_\_

Street Address: \_\_\_\_\_ (Suite/Unit #): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work: \_\_\_\_\_ Cell: \_\_\_\_\_

2) **NAME:** \_\_\_\_\_ **Relationship:** \_\_\_\_\_

Street Address: \_\_\_\_\_ (Suite/Unit #): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work: \_\_\_\_\_ Cell: \_\_\_\_\_





**HAWAIIAN AIRLINES**

*Na Wahine O Ke Kai*

**NW-6 Hilton Hawaiian Village Liability Release**

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**DOCK LIABILITY RELEASE AND  
HOLD HARMLESS AGREEMENT**

THE AGREEMENT is entered into as of \_\_\_\_\_, by and between  
HILTON HAWAIIAN VILLAGE LLC (“Owner”), d/b/a **Hilton Hawaiian Village**  
 (“Hotel”), located at 2005 Kalia Road, Honolulu, Hawaii 96815 and  
\_\_\_\_\_ (hereinafter referred to as “Client”).

**[Print Name]**

WHEREAS, Hotel will allow Client to access Hotel’s dock and Client agrees to  
assume all risks and hazards incidental to such access (“Activity”);

NOW, THEREFORE, in consideration of the covenants herein contained, the parties  
agree as follows:

Client hereby fully releases and forever discharges the Hotel, its owners and Hilton  
Worldwide, Inc., and their officers, employees and agents from any and all liability for loss,  
damage or injury that he/she may sustain in the course of performing the Activity.

Client further agrees to protect, indemnify, defend and save the Hotel, its owners and  
Hilton Worldwide, Inc. and their employees and agents harmless against all claims, losses or  
damages to persons or property, governmental charges, fines and attorney's fees arising out  
of or caused by Client’s Activity on the Hotel premises.

**CLIENT:**

**HOTEL:**

HILTON HAWAIIAN VILLAGE  
BEACH RESORT & SPA  
By HILTON MANAGEMENT, LLC, Managing  
Agent

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Title: \_\_\_\_\_

Signature: \_\_\_\_\_

Signature: \_\_\_\_\_



**Hawaiian Canoe Racing Association Insurance Program  
Adult and Minor Waiver and Release of Liability  
January 1, 2016 to December 31, 2016**

**Canoe Club:** \_\_\_\_\_

In consideration of being allowed to participate in any way in the Hawaiian Canoe Racing Association and its member organizations' athletics/sports programs, and related events and activities, the undersigned:

1. Agree that prior to participating, they each will inspect the facilities and equipment to be used, and if they believe anything is unsafe, they will immediately advise their coach or supervisor of such condition(s) and refuse to participate.
2. Acknowledge and fully understand that each participant will be engaging in activities that involve risk of serious injury, including permanent disability and death, and severe social and economic losses which might result not only from their own actions, inactions or negligence, but the action, inaction or negligence of others, the rules of play, or the condition of the premises or of any equipment used. Further, that there may be other risks not known to us or not reasonably foreseeable at this time.
3. Assume all the foregoing risks and accept personal responsibility for the damages following such injury, permanent disability or death.
4. Release, waive, discharge and covenant not to sue the Hawaiian Canoe Racing Association, its member associations, its affiliated clubs, their respective administrators, directors, agents, coaches, and other volunteers or employees of the organization, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and leasers of premises used to conduct the event, all of which are hereinafter referred to as "releasees", from demands, losses or damages on account of injury, including death or damage to property, caused or alleged to be caused in whole or in part by the negligence of the releasee or otherwise.

The undersigned custodial parent or legal guardian acknowledges that he/she is also signing this release on behalf of the minor participant, that he/she is waiving certain rights on behalf of the minor participant that the minor participant otherwise may have and that the minor participant shall be bound by all of the terms of this release. By signing this waiver and release without a parent's or guardian's signature, the participant represents he/she is at least 18 years of age, or, if signing as the parent or guardian of the participant, signer represents they are the custodial parent or legal guardian of the minor participant.

**THE UNDERSIGNED HAVING READ THE ABOVE WAIVER AND RELEASE, UNDERSTAND THAT THEY HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT AND SIGN IT VOLUNTARILY.**

**Paddler Name (print)** \_\_\_\_\_ **Sex**  F  M  
**Street Address** \_\_\_\_\_ **Birthdate** \_\_\_\_\_  
**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip Code** \_\_\_\_\_  
**Phones: Home** \_\_\_\_\_ **Work** \_\_\_\_\_ **Cell/Pager** \_\_\_\_\_  
**Email Address** \_\_\_\_\_  
**In an emergency, contact** \_\_\_\_\_ **Phone** \_\_\_\_\_

**If a minor, Printed Name of Custodial Parent or Guardian** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date** \_\_\_\_\_

(Adult Paddler or Minor's Guardian)



**HAWAIIAN AIRLINES**

*Na Wahine O Ke Kai*

**NW-8 QUALIFYING RACE REQUIREMENT FORM**

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CLUB \_\_\_\_\_

CONTACT NAME & PHONE NO. \_\_\_\_\_

COACH \_\_\_\_\_ AGE (min age is 25) \_\_\_\_\_

Molokai Race Experience: As a Coach (# of years coached) \_\_\_\_\_

As a Paddler (# of years paddled) \_\_\_\_\_

Coach Year & Club paddled or coached: \_\_\_\_\_

HELPER \_\_\_\_\_ AGE (min age is 21) \_\_\_\_\_

Molokai Race Experience: As a Helper (# of years assisted) \_\_\_\_\_

**RACE QUALIFICATIONS:**

All paddlers in every division must complete one (1) qualifying race (in the current year) consisting of twenty-five (25) or more miles which must include water changes with an escort boat and a canoe canvas cover. Paddlers are not required to qualify as a team in the qualifying race. Submit the following information with the registration packet:

1. Qualifying Race Crew Entry Form (including names, birthdates and any and all other information required on the form);
2. Race Director or Executive Board Member of the Association that is hosting the qualifying race must sign the entry form confirming the participation of the participant;

**Form NW-2 Crew List must be submitted with this Form**

**Deadline to submit proof of racing qualifications for 2016 season is September 19, 2016.**

**The Na Wahine O Ke Kai race committee reserves the right to refuse any entry in any division.**