OPEN SEA RACE ENTRY FORM

TO THE SECRETARY OF:	· · · · · · · · · · · · · · · · · · ·			
DI FACE ENTED THE VACU				
PLEASE ENTER THE YACH	IT:			
YACHT CLUB:	FOR THE RACE:			
NATIONAL QUADACTERE	OTION OF MACUT			
NATIONAL CHARACTERES	STICS OF YACHT			
FLAG:	PORT OF REGISTRY:			
NATIONAL LETTERS AND	DISTINGUISHING NUMBER:			
STRUCTURAL AND RIGGIN	IG DETAILS			
TYPE:	DESIGNER: YEAR OF BUILT:			
	COLOUR OF DECK:			
	FACE:TYPE OF RIGGING:			
	FROM TOP DOWNWARDS:			
	TROM FOI DOWNWARDS.			
N03				
DETAILS OF MEASUREME	NT CERTIFICATE			
	OF ISSUE: ISSUED BY:			
THE RATING IS:				
R/T - VHF				
INTERNATIONAL No:	AVAILABLE CHANNELS:			
SKIPPER DECLARATION				
4) The condension of	Lateralana disetta anno de			
be bound by the rules and	I declare that I agree to conditions that are stated in the notice of race and the sailing instructions			
and I will participate in the race(s) under my own responsibility. I agree furthermore that the				
organizing club(s) and any other Committee associated with the race(s) bear no responsibility for any				
	may occur to my boat, to persons or things during the race(s) or at any			
time at sea or ashore.	at is equipped in accordance with the Special Regulations Governing			
2) I declare also that the boat is equipped in accordance with the Special Regulations Governing Offshore Racing issued by ISAF, for race category				
The above boat	· · · · · · · · · · · · · · · · · · ·			
	s) during the race(s) □ - license by my National Authorities attached			
will not display advertiseme	ent(s) during the race(s) Lipies of my boat's measurement certificate as well as the attached 2 nd page			
	been altered or recalled till today.			
Date:	Signature:			
FULL NAME IN CAPITALS:	CLUB:			
	PHONE No:			
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CREW LIST

RACE:	DATE:		
	YACHT NAME:		
		REGISTER No:	YACHT CLUB
SKIPPER:			
AUTH. REPRESENTATIVE:			
CREW:			
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AUTHORIZED REPRESENTATIVE:		CLUB:	
DATE:	SIGNATU	RE:	
The CREW LIST received by:			
FULL NAME IN CAPITALS:		ATTRIBUTE.	
PLACE:		TIME:	