



Cowes Corinthian Yacht Club Keelboat Race Around the Wight

ENTRY FORM

Name of Boat: _____ Sail Number: _____

Colour of Hull: _____ Class of Keelboat: _____

I am a member of the following Yacht Club: _____

During the race the following mobile will be on board and working. _____

Name of Owner/Skipper _____

Name of Crew: _____

Address: _____

Tel Home: _____ Mobile: _____

Email: _____

Emergency Shoreside contact _____

Waiver of Liability Declaration by the Owner/Skipper submitting this Entry Form

To the best of my knowledge the information I have given is accurate. I understand that Keelboat racing can be dangerous. I agree that CCYC, sponsors and their agents, have no responsibility for loss of life or injury to members or others, or for the loss of, or damage to any vessel or property. I have paid particular attention to and agree to be bound by CCYC NoR 13 Risk Statement. Before racing I will effect adequate and suitable insurance. Before racing I will ensure that my crew is aware of:

- The undertaking in this Declaration
- The importance of effecting appropriate personal insurance
- Their responsibility in rules observance, and in particular RRS 1.2 (wearing personal floatation devices adequate for the conditions).

I agree to be bound by RRS, RYA Prescriptions, this Notice of Race and other applicable rules. The boat will be available for inspection. I will ensure that no crew members races contrary to the terms of any ban imposed by World Sailing or a National Authority.

I understand and agree that the information given in this entry form and results will be maintained on the Club's computer to be used for all aspects of race organization.

Signature of Owner/Skipper: _____ Date: _____

I require _____ tickets for the Barbeque on Saturday 9th June at the CCYC at a cost of £10.00 each. Please advise any dietary requirements or food allergies when returning this form. _____

_____ No of Vegetarians: _____

I enclose ENTRY FEE: £40.00 (£60.00 if entered after 19th May)

Cheques to be made payable to COWES CORINTHIAN YACHT CLUB and sent to: The Secretary, Cowes Corinthian Yacht Club, 39 Birmingham Road, Cowes, Isle of Wight, PO31 7BH.

Payment can be made by credit/debit card by completing the following section

Cardholder's Name _____

Credit Card Number _____

Expiry date _____ CVV Number _____

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