



Event Entry Form								
0 11 11					.			
Sail No:					Boat Name:			
Nationality:					Colour:			
Helm					C		T	
Forename:					Surname:			
Gender:					DOB:			
Club:								
Address:							1	
Town/City:					Post Code:			
Email:								
Mobile:								
_								
Crew					T		_	
Forename:					Surname:			
Gender:					DOB:			
Email:								
Mobile:								
Entry Type								
Standard			Junior				First Nationals	
			•					
Payment:	Cheque				Bank Transfe	er		
	-							
Declaration								
I agree to be bound	d by the Rac	ing	Rules of Sail	ling a	and all other rul	es th	at govern this event. In particu	ılar,
							and agree that my boat will	
conform to the req	uirements	set c	out in the No	otice	of Race throug	hout	the event.	
Signed:								
Date:								