

**PORT STEPHENS YACHT CLUB
SERIES ENTRY FORM
Season 2009/2010**

YACHT

Yacht Name:					
Yacht Class:		Sail No:		Length	
Hull Colour:		Trim Colour:			
Mooring Location:		Waterways Reg No			
Third Party *** Insurance Company:		Third Party Amount		Policy No	

OWNER

Owner Name:	YA No.				
Co-Owner Name:					
Address:					
Suburb/Town/State:			Postcode:		
	<u>YA No</u>			<u>YA No</u>	
Crew Name:			Crew Name:		
Crew Name:			Crew Name:		
Crew Name:			Crew Name:		

***** Insurance must cover racing**

ENTRY

I WISH TO ENTER THE FOLLOWING SERIES IN 2009/2010.

Tick the box for YES.

Ocean Series	<input type="checkbox"/>	Inshore Sternchaser	<input type="checkbox"/>	Sprint Series	<input type="checkbox"/>
Spring Pointscore	<input type="checkbox"/>	Summer Pointscore	<input type="checkbox"/>	Marathon Series	<input type="checkbox"/>
Summer Twilight Series	<input type="checkbox"/>	Winter Twilight Series	<input type="checkbox"/>		<input type="checkbox"/>

DECLARATION

I agree to be bound by the YA Racing Rules of Sailing, as amended by Sailing Instructions. I acknowledge that Fundamental Rule 4 – Decision to Race places the sole responsibility for deciding whether or not to start, or to continue racing, on the yacht.

I declare that my yacht will at all times whilst racing be adequately covered by Third Party Liability Insurance. I also declare that my yacht will at all times, whilst racing, comply with YA Racing Rules of Sailing 2005-2009, Special Regulations, Addendum A, Category 3 Category 4 Category 5 or Category 6 (circle categories applicable).

NAME: (print)

SIGNATURE:

DATE: