

ROYAL TORBAY YACHT CLUB

BRITISH ISLES FLYING FIFTEEN ASSOCIATION SOUTHERN CHAMPIONSHIP

7TH – 8TH JUNE 2008

ENTRY FORM

Helm Name.....
Address.....
.....
Tel. No.....E-Mail.....
Club.....
Name of Boat.....Sail No.....
Crew Name.....
Club.....

I agree to be bound by the rules as defined in the Racing Rules of Sailing and the Rules and Bye Laws of the Royal Torbay Yacht Club, and agree that I will ensure that all persons on board are aware of the content of all rules affecting the safety and conduct of the boat and that third party insurance as specified in the Notice of Race will be in place for the duration of the Championship.

Signed.....Date.....
Age (if under 18)..... (Parental/Guardian consent form below must be signed).

Under law, this helm is my dependent, and I accept paragraph 13 of the Notice of Race which excludes my dependent's right to claim compensation in certain circumstances. I declare that during the Championship the boat will have valid and current third party insurance as set out in paragraph 14 of the Notice of Race. I confirm that my dependent is competent to take part and that I am responsible for my dependent throughout the Championship. During the time my dependent is afloat I will be in or around Royal Torbay Yacht Club or I will inform the Race Officer in writing who is acting in loco parentis during my absence.

Name.....Signature.....Date.....

Entrance Fee Required

£40.00

I enclose a cheque payable to the Royal Torbay Yacht Club for £

Or

Debit Card Payment

Card No..... Valid from Valid to

Name of Card Card Type Security No

Please Debit my card to the sum of £ Signed

Send to

The Club Secretary, Royal Torbay Yacht Club, 12 Beacon Terrace, Torquay TQ1 2BH