



NATIONAL FIREFLY CLASS

62ND CRAFTINSURE NATIONAL CHAMPIONSHIP

Saturday 2 August – Friday 8 August 2008

ENTRY FORM

Please print clearly

Name of Helm:	Date of Birth of Helm:
Address:	Boat No:
	Sail No if different:
Post Code:	Boat Name:
Email Address:	NFA Membership No:
Home Tel No:	Sailing Club:
Work Tel No:	Mobile Tel No:

Name of Crew:	Date of Birth of Crew:
---------------	------------------------

I am eligible to compete for the following trophies. Please tick or complete the appropriate boxes to qualify for the trophy.

Veterans/Geriatric (Helm over 40 on .01.01.08)	<input type="checkbox"/>	The Ultimate (Enter combined age of helm and crew as of 02.08.08) All competitors to complete	<input type="checkbox"/>
Insurance Trophy (Helm under 21 on 01.01.08)	<input type="checkbox"/>	Eden (Best improver – enter final position at Weymouth 2007)	<input type="checkbox"/>
Restronguet Ovaloid (Helm under 18 on 01.01.08)	<input type="checkbox"/>	Deben Ladies (Helmswoman)	<input type="checkbox"/>

Please enter my boat for the 62nd Craftinsure National Firefly Championship. I agree to be bound by the Racing Rules of Sailing and all other Rules that govern the championship. In particular I have read paragraphs 11 and 12 of the Notice of Race and confirm that I agree to their provisions and that my boat will conform to their requirements throughout the championship.

Signature of Helm: Date:

NATIONAL FIREFLY CLASS

62ND CRAFTINSURE NATIONAL CHAMPIONSHIP

Saturday 2 August – Friday 8 August 2008

A parent or guardian for any competitor who is under the age of 18 at the time of the championship must complete the following.

Helm
Under law, this helm is my dependent, and I accept paragraph 11 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 of at least £2m. 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: Telephone No: (Day)

Address:..... Telephone No: (Evening)

..... Telephone No: (Mobile)

Signature: Date:

Crew
Under law, this crew is my dependent, and I accept paragraph 11 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 of at least £2m. 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: Telephone No: (Day)

Address:..... Telephone No: (Evening)

..... Telephone No: (Mobile)

Signature: Date:

Entry Fees: Entries received by Saturday 19 July 2008** - £150
Entries from Sunday 20 July 2008 onwards - £170
** Helms under 22 years (on 1st January 2008 qualify for a discounted rate (£75 reduction) up to Saturday 19 July 2008 (thereafter £170)

This entry form, fully completed, should be returned, together with the entry fee, (payable to Royal Torbay Yacht Club) to the Club Secretary, Royal Torbay Yacht Club, 12 Beacon Terrace Torquay. TQ1 2BH