## Foiling Moth Open Meeting

## 24/25 Oct 2009

## **ENTRY FORM**

NAME OF HELM:				
ADDRESS:				
DATE OF BIRTH:		EMAIL:		
TEL NO:		MOBILE NO:		
NAME OF BOAT:		SAIL NO:		
I agree to be bound by the rules as defined in the Racing Rules of Sailing. I also 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 liability insurance with a minimum of £2,000,000 will be in place for the duration of the event.				
Signed:		Date:		
Any competitor aged under 18, shall complete a Parental Disclosure Form, Photography Consent Form and a Medical Consent Form.				
ENTRY FEE RECEIVED BEFORE THE 24 <sup>th</sup> OCT £25.00 ENTRY FEE ON THE 24 <sup>th</sup> OCT £30.00  I enclose a cheque payable to the Royal Torbay Yacht Club Or Debit Card Payment				
Card No:	Valid fron	n:	Valid to:	
Name on card:	Card Type	2:	Security No:	
Please debit my card to the sum of £25.00	Signed:	igned:		

Send to: The Sailing Secretary, Royal Torbay Yacht Club, 12 Beacon Terrace, Torquay, Devon TQ1 2BH