

Starcross Yacht Club

Open Meeting Entry Form

Class:	<input type="text"/>	Date:	<input type="text"/>
Club:	<input type="text"/>	Sail No:	<input type="text"/>
Helm:	<input type="text"/>	Age if under 18	<input type="text"/>
Crew:	<input type="text"/>	Age if under 18	<input type="text"/>

(A parent or guardian must complete a consent form in order for Starcross Yacht Club to accept and register this entry for the person/s named above to race in this open meeting/regatta/race or races on the date/s stated on this entry form) .

Contact Details

Address:

Post Code

Home Phone

Mobile

Email

<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>

I agree to the conditions of entry and to race according to the event Sailing Instructions and ISAF 2009-12 racing rules.

Signed

Date