



FALSE BAY YACHT CLUB

BAY 2 BAY

ENTRY FORM

Start: 17h00, 10 November 2017

Print, complete, sign, and submit to the Race Office at the False Bay Yacht Club, King Georges Way, Simon's Town 7975, PO Box 45 Simon's Town 7995
E-mail: sailing@fbyc.co.za; or Fax: 021- 786 3925

| | | | | | |
|----------------------------------------|--------------------------------------|--------------------------------------|--|------------------|--|
| BOAT NAME: | | | | | |
| SAIL NUMBER: | | | | | |
| OWNER'S NAME: | | | | | |
| SKIPPER'S NAME: | | | | | |
| SKIPPER'S CONTACT TEL: | | | | | |
| SKIPPER'S EMAIL ADDRESS: | | | | | |
| CLASS OF BOAT & DESIGN: | | | | | |
| LENGTH OVERALL: (m) | | Beam (m) | | Draft (m) | |
| NO. OF CREW (incl. skipper): | | | | | |
| SKIPPER'S QUALIFICATION DETAILS | | | | | |
| VALID C.O.F.* CATEGORY | | | | | |
| Starting Club | <input type="checkbox"/> FBYC | <input type="checkbox"/> HBYC | | | |
| ENTRY FEE PAID: | | | | | |

*C.O.F. = Certificate of Fitness

Legible proof of payment to be submitted with entry.

The standard entry fee shall be R 200.00 per boat.

Entry forms to be submitted and paid by 8 November 2017.

Name of Bank Account: False Bay Yacht Club

Reference: B2B Race 2017 - < plus your boat name >

Bank: Standard Bank, Fish Hoek

Account No: 072066547

Branch code: 036009

I have read and agree to be bound by the Notice of Race of the Bay-to-Bay Race 2017. I understand and acknowledge that the Boat will sail entirely at its own risk, that the onus on whether to start a race and continue racing lies entirely with the skipper and that none of the organisations or persons concerned in the running of this race accept liability for damage, injury or death, material or personal, incurred during the race or at any other time, however arising. I agree to be bound by the ISAF Racing Rules of Sailing and by all other rules that govern this event.

| | | | |
|--------------|--|-----------------------------|--|
| DATE: | | SIGNED BY: (SKIPPER) | |
|--------------|--|-----------------------------|--|

For Office Use:

| | |
|-----------------------------------|--|
| Proof of payment received (date): | |
| Crew list received: | |
| C.O.F confirmed: | |
| Skipper's Certificate verified: | |
| Scrutineering complete: | |