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| Owner: |  | Boat Name: |  |
| Address Line 1: |  | Sail Number: |  |
| Address Line 2: |  | Make/Model: |  |
| Postcode: |  | Hull Colour: |  |
| Email Address: |  | Club: |  |
| Mobile No.1For WhatsApp Group |  | Visitor Mooring Required? | Yes/NoPlease indicate |
| Mobile No.2For WhatsApp Group |  | Crew List: | **PLEASE COMPLETE CREW LIST ON PAGE 2 OF THIS ENTRY FORM** |

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| --- | --- | --- | --- | --- | --- | --- |
| **YTC Number**Attach Certificate**Must be completed by all boats** |  |  | IRC Rating (2023)Attach Certificate |  | White SailInsert a **X** in the box ifno spinnaker |  |

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| **RACE ENTRY FEES** |  | Insert **X** |  | Entry Fee (£) |
|  | Full Series (5 Races) |  |  | £40.00 |
|  | Or Race 1 |  |  | £10.00 |
|  | Or Race 2 |  |  | £10.00 |
|  | Or Race 3 |  |  | £10.00 |
|  | Or Race 4 |  |  | £10.00 |
|  | Or Race 5 |  |  | £10.00 |
|  | Total |  |  | £ |

**PAYMENT To:** A/C Name: Medway Yacht Club A/C No: 69656844 Sort Code: 40-51-62  Payment Ref: Boat Name AS2023 (e.g. Invicta AS2023)

**REPRESENTATIVES DECLARATION**

Please enter the boat for the series /race(s) in the Cruiser Handicap Class as indicated above; the fees are enclosed.

I agree to be bound by the Racing Rules of Sailing (RRS) 2021-2024, RYA Prescriptions, the MYC Cruiser Class Sailing Instructions, including the Notice of Race, MYC Cruiser Class Minimum Equipment List and any supplementary instructions and relevant Class and Rating Authority rules. If any alteration likely to affect rating is made, I will notify the Rating Authority and Race Committee immediately. The boat will be racing in measurement trim and will be made available for inspection. I understand that cruiser racing can be dangerous, and I agree that the organisers have no responsibility for any loss, damage, death or personal injury to me, my crew or others, or for the loss of, or damage to, any vessel or property, as a result of taking part in a race or races. I will pay particular attention to Section 2 “Disclaimer of Liability”, in the MYC Cruiser Class Sailing Instructions and related RRS, RYA and ORC orders and regulations. Before racing I will affect adequate and suitable insurance with third party liability. I will also ensure my crew is made aware of the undertaking in this declaration, the importance of effecting appropriate personal insurance and their responsibility in rules observance, in particular RRS 1.2 (wearing personal buoyancy adequate for the conditions). I understand and agree that the information given in this form and also the race lists and results will be maintained on the club’s computer.

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| Name:   | Date:   | Capacity:  |

**Entry Forms to be submitted via the Club Office, FAO Autumn Series Race Officer, or by email to:** office@medwayyachtclub.com

**CREW LIST**

|  |  |  |  |
| --- | --- | --- | --- |
| First Name | Surname | Next of Kin | Next of Kin Contact No. |
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