



Centreboard Race Entry 2011-2012

(Race entries & fees are to be delivered to the MYC Office at least one week prior to racing)

East Esplanade, MANLY (foot of Wood Street) | East Shore, MANLY COVE | VHF – 72
P.O. Box 22, MANLY NSW 1655 | Ph 02 9977 4949 | Fax: 02 9977 3573 | Website: www.myc.org.au

BOAT NAME: SAIL NUMBER:
DESIGN/CLASS: LOA: LWL:
OWNER: MYA CLUB:
ADDRESS: HOME&MOBILE:
..... P/C: E-MAIL:
EMERGENCY CONTACT: HOME&MOBILE:

SERIES/RACE ENTRY (√ Tick)	FEE (incl GST)
<input type="checkbox"/> CC - Club Championship	\$100.00
<input type="checkbox"/> SPS - Spring Series	\$90.00
<input type="checkbox"/> APS - Autumn Series	\$90.00
<input type="checkbox"/> Casual Race Entry Date:	\$15.00

ATTACHED: For the boat listed above, I/We have previously made available to the MYC Office or I/We have now attached to this entry form a current and valid copy of **both** an "Off the Beach" Equipment Audit Form **and** confirm that the boat is adequately insured.

NOMINATED HELM ELIGIBILITY: The 'Nominated Helm' must be a YA and MYA Club member. **YA**=Yachting Australia. **MYA CLUB**=Member Club of a State/Territory Yachting Authority.

RESPONSIBILITY: All those taking part in any race understand that they do so at their own risk and responsibility. Manly Yacht Club and its respective officers, employees, volunteers, and members, accept no liability for any injury, loss, or damage that may be suffered by any competitor, prior to, during, or after any race.

DECLARATION: I/We agree to be bound by the Racing Rules of the ISAF; the prescriptions/special regulations of the AYF; the Notice of Race and the Sailing Instructions as published by the Manly Yacht Club; and all other rules that govern these races. I/We acknowledge that it is our/my sole responsibility to decide whether or not to start or continue any race.

Signature of Owner/Representative: Date:

JUNIOR HELM and/or CREW (UNDER 16yrs): Please accept my child's entry in this race/series. The rules of sailing & safety have been presented to my child and I am sure he/she clearly understands them. I/We are aware that it is our/my sole responsibility to decide whether or not to start or continue any race.

Signature of Parent: Date:

Signature of Parent: Date:

PAYMENT METHOD (√ Tick) CASH CHEQUE VISA MASTER CARD

Credit Card: Card Holders Name:Amount:

Card Number:Expiry Date:

(PLEASE PRINT CLEARLY)

Signature:

By Mail: Manly Yacht Club, P.O Box 22, MANLY NSW 1655

By Fax: 02 9977 3573

In Person: East Esplanade, Manly (foot of Wood Street)

Office Hours (only on race days): 11:00-18:00 (Sundays) or 17:00-19:00 (Twilight Fridays)

Entries may also be left in downstairs mailbox at anytime (on lower entry door)