

**DOLPHIN CLASS SAS NATIONAL CLASS CHAMPIONSHIPS 2017**

**Incorporating FINN TIGER CUP 2017**

**ENTRY FORM**

The Regatta Secretary

P.O. Box 12639

Clubview

0014

Fax : 086 6136085

E-mail: marius@lonerock.co.za

Account Name	:	Dolphin Class Association
Bank	:	ABSA
Branch Code	:	632 005
Account Number	:	9182942523
Type of Account	:	Money market

In terms of the published Notice of Race for the above event, please enter the following yacht in the above National Class Championship event.

**Yacht Details**

Name: ..... Class: .....

Category: ..... Sail Registration Number: .....

Reg. / Measurement Certificate: No: ..... Issued By: ..... Date.....

**(Enclose copy with Entry Form)**

**Registered Owner:** ..... Class Member: Yes / No

Club of which a member ..... SAS Membership No.

**Name of Helmsman:** ..... SAS Membership No: .....

Contact Tel No: ..... E-mail address: .....

Date of Birth (if under 19): ..... Club of which a member:

**Name of Crew:** ..... SAS Membership No: .....

Date of Birth (if under 19): ..... Club of which a member: .....

***In cases of entries with additional crew, a separate listing of all individual's details should be forwarded with this form.***

Sanctioned 5 January 2017

I am a member in good standing of the \_\_\_\_\_ Class Association.

I enclose my Entry Fee as detailed in the Notice of Race for R .....

***This Entry form along with a copy of the deposit slip and Measurement Certificate are to be faxed to the above fax number to confirm entry formalities!***

**I declare, by my signature, that:**

- *I agree that competitors sail entirely at their own risk and agree that none of the organizations or persons concerned in the running of the Championships accepts liability for damages or injury suffered at any time during the period of, or as a result of the Championships.*
- *I agree to be bound by the ISAF Racing Rules 2017-2020, ~~the ISAF Equipment Rules of Sailing 2017-2020~~, the Requirements for SAS National Class Championships, the Notice of Race, the Sailing Instructions and the Rules of the Dolphin or Finn Class Association.*
- *No alterations that could affect the Measurement / Registration Certificate have been made since the certificate was issued.*
- *the information provided in this entry form is to the best of our knowledge correct.*
- *I am competent to handle a yacht in adverse conditions.*
- *I confirm that I am fully aware of SAS and Class Rules and Regulations governing the wearing and / or carrying of safety equipment in the yacht and that the yacht entered, complies with the minimum buoyancy requirements.*

Signed: \_\_\_\_\_ Owner / Skipper (Parent or Guardian if a minor) Date: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_ Mobile: \_\_\_\_\_

E-mail address (Please print clearly): \_\_\_\_\_

**PLEASE NOTE: INCOMPLETE FORMS WILL NOT BE ACCEPTED**

**For Office Use:**

Date Received: \_\_\_\_\_ Class: \_\_\_\_\_ Date Captured: \_\_\_\_\_