## NCYC MID-CHANNEL RACE 2017 ENTRY FORM NORTH CAPE YACHT CLUB

OWNER/SKIPPER:	SAIL #: NCYC MBR #:		
BOAT NAME:			
ADDRESS:			
CITY:	STATE:	ZIP CODE:	
TELEPHONE #:	EMAIL ADDRE	SS:	
CLASS ENTERED (check one): PHRF:	JAM:	RATING:	Sec/Mile
MAKE OF BOAT & LENGTH:			
INSURANCE ON FILE: YES NO			
Registration must include this form, a copy of yo (unless on file at NCYC), and your entry fee of \$ registering after September 8, 2017 will be subje <b>payable to North Cape Yacht Club.</b> Registration Cape Yacht Club, c/o Yachting Activities, 11850	640 (\$45 for non-m ect to an additional ons may be given t	embers of NCYC). Skipp \$10 late fee. <b>Checks s</b> i to bar personnel or maile	pers/Owners h <b>ould be</b>
Please accept my entry in Mid-Channel Race. Comp 4, Decision to Race). It shall be the sole responsibilit to race. I agree to be bound by The Racing Rules of and by all other rules that govern this event.	ty of each yacht to de	ecide whether or not to star	t or to continue
To the fullest extent permitted by law, I hereby waive authority, race committee, protest committee, host cl with the event with respect to personal injury or prop participation in this event and hereby release the rac	lub, sponsors, or any erty damage suffered	other organization or offici d by myself or my crew as a	al) involved a result of our

OWNER/SKIPPER:

DATE: