

2004/2005 MEMBERSHIP, REGISTRATION AND ENTRY FORM

PLEASE REGISTER THE SHARPIE _____ Sail no. WA _____

REGISTERED AT _____ CLUB

Does your boat carry sponsorship? (NO) (YES) details _____

AND ENTER THE SHARPIE FOR THE FOLLOWING

TRAVELLER SERIES YES/NO

STATE SELECTION YES / NO (PLEASE ONLY IF GOING AWAY, YOU CAN STILL SAIL THESE RACES IF NOT ENTERED STATE SELECTION)

STATE CHAMPIONSHIPS OPEN Division- YES / NO

STATE CHAMPIONSHIPS COUNTRY Division- YES / NO (sharpies registered at a country club)

STATE CHAMPIONSHIPS GOLDEN OLDY YES / NO (crew combined over 120 years as of State heat 1)

STATE CHAMPIONSHIPS MASTERS YES / NO (skipper over 50 years as of State heat 1)

STATE CHAMPIONSHIPS WOMENS Div. YES / NO (skipper only needed to be female)

STATE CHAMPIONSHIPS YOUTH Div. YES / NO (skipper 21 years or under as of State heat 1)

And nominate the Sharpie for 3 of a Kind regatta selection YES / NO

I indemnify MBSC (Inc.), EFYC (Inc), PFSYC ,GYC, GBYC, MOF&SC & the SHARPIE ASSOCIATION OF W.A. (Inc.) from any responsibility for injury, loss or damage incurred by myself or my crew or our respective families whilst preparing for, taking part in or subsequent to. I agree to be bound by the Racing Rules of Sailing, and by all other rules that govern these events and I acknowledge RRS 4, which states, "*The responsible for a boat's decision to participate in a race or to continue racing is hers alone*".

- Eligible competitors shall be a member of an AYF affiliated Yacht/Sailing Club and a financial member of the ASSA (WA)

NAME OF HELMSPERSON _____ AYF no. _____

SIGNED _____ DATE _____

ADDRESS _____

Home phone _____ work phone _____ contact fax _____ e-mail _____

NOTE

- THIS REGISTRATION AND ENTRY FORM AND FEES MUST BE RECEIVED BY AN EXECUTIVE MEMBER TO BE ELIGIBLE FOR ANY ASSOCIATION EVENT. Failure to do so will result in a DNS recorded.

SHEETHAND NAME _____ AYF no. _____

ADDRESS _____

Home phone _____ work phone _____ contact fax _____ e-mail _____

FORWARDHAND NAME _____ AYF no. _____

ADDRESS _____

Home phone _____ work phone _____ contact fax _____ e-mail _____

ASSOCIATE OR NON SAILING MEMBERSHIP

NAME _____

ADDRESS _____

Home phone _____ work phone _____ contact fax _____

FEES cheques made payable to ASSA (WA)

MEMBERSHIPS HELMSPERSON \$30 JUNIOR MEMBER (under 21) \$5

SHEETHAND \$30 ASSOCIATE MEMBER \$10

FORWARDHAND \$30

RACE FEES \$25

BOAT REGISTRATION \$30

\$145

PLEASE SEND THIS FORM AND THE APPROPRIATE FEE TO PO Box 1730 Applecross 6953 or The Treasurer ,5 Williams CT, Melville 6155

Online banking payments: Westpac BSB: 736054 Account: 070196, please enter your details (eg- sail No) in the description, so we know who paid! Email Ken at dejavu@iinet.net.au