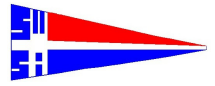


SOUTHAMPTON WATER SAILING ASSOCIATION 2011 DINGHY RACING ENTRY FORM



SURNAME	FORENAME	OVER 18 ? (IF UNDER 18 PARENTAL DISCLAIMER REQUIRED – SEE BELOW)	
MONO OR MULTIHULL ?	ASYMMETRIC SPINNAKER ?	NORMAL HANDICAP (PLEASE INDICATE WHETHER PY OR SCHRS)	BOAT NAME
SAIL NO.	CLASS	SAILING CLUB NAME (OR CONFIRMATION OF RYA MEMBERSHIP)	

- Sailing instructions for SWSA events may be downloaded from the website www.swsa.org.uk
- Handicaps for all events will be allocated by SWSA but will be based upon the Portsmouth Yardstick (PY) system for mono-hulls and the Small Catamaran Handicap Rating System (SCHRS) for multi-hulls.
- Completion of this form entitles boats to compete for the SWSA dinghy regatta, traveller series and evening series trophies (no fees applicable).

COMPETITOR DECLARATION

I understand that boating, sailing or racing may be dangerous and that all who take part in SWSA events do so at their own risk. I undertake to make all crew members aware of this before embarking.

- I agree to abide by the individual event sailing instructions and to sail in compliance with the RYA racing charter.
- The dinghy is insured as required by the SWSA and will continue to be so during every race entered (third party £2,000,000 minimum)
- The above details of my boat are correct to the best of my belief. I agree to my name, address and boat details being stored in a computer.

I intend to compete in:	Please tick where appropriate
2 day regatta	
Traveller Series	
Evening Series	

Signed..... Date.....

Address (Please Print).....

.....
.....

Post Code

Email

Home Tel

Mobile

Emergency contact name & phone no.

PARENTAL DECLARATION:

I understand that the event organisers cannot be expected to know the capability of every child to cope with different sailing conditions, and I accept sole responsibility for allowing the above child to sail. I declare that I have read and understood the competitor declaration for the boat and the insurance requirements stipulated above. My child is therefore permitted to take part in the events to which this entry form relates.

Signed (Parent/Guardian).....

Date

<p>Please send this entry form to:- (For enquiries, tel 01962 861991 or mob 07913758485 Email: chrismwaddington@yahoo.co.uk</p>	<p>Chris Waddington 6 Momford Road, Olivers Battery Winchester, SO22 4LE</p>
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