

ENTRY FORM

Rhodes 19 East Coast Championship Regatta

New Bedford Yacht Club, South Dartmouth, Massachusetts, June 22-24, 2007

Skipper's Name Under 21? yes no Home Phone _____ Other Phone _____

Address E-Mail Address _____

City, State, Zip Require launching? yes no Preferred Day & Time Window
Wed 8am-5pm, Thur 8am-6pm (low tide restricted)

Crew # 1 Under 21? yes no Crew # 2 Under 21? yes no

Yacht Club or Port of Call Mooring or Dock overnights: All set - have my own
 Need something (you may be rafted)

Boat Name Sail # Hull Color R19 Fleet # Spinnaker Color(s)

Skipper's Certification

I hereby certify that my boat & sails conform in all respects to the latest rules set forth in the Rhodes 19 Class Association rules. The same crew will sail all races with me, and no changes will be made without prior permission of the Race Committee. I agree to be bound by The Racing Rules of Sailing and by all other rules that govern this event.

Skipper (Print Name) Signature Date

Waiver of Class By-Law, Article XII, B 12.02

I hereby request a waiver from Rhodes 19 Class By-Law Article XII, B 12.02 requiring that I compete with at least 3 crew members. I understand that I must sail the entire regatta with two crew members and that if our combined weight does not meet or exceed 375 pounds, then additional ballast must be carried sufficient to meet that weight limit.

Skipper (Print Name) Signature Date

ENTRY FEE: \$175 per boat

Entitles three people per boat to great racing, R19 launching/hauling, R19 dock or mooring, coffee/pastries each race day morning, après race beer & snacks, Saturday night dinner, and one event T-shirt. Box lunches are available for an extra fee. Entries received after May 18, 2007 are subject to a late fee. Extra Saturday dinner tickets are available (if purchased by 6/21)

Entry Fee \$175 \$ _____

Late Fee \$40 (after May 18, 2007) \$ _____

Extra Saturday dinner tickets \$35 \$ _____

Extra T shirts (cool design \$15 each) \$ _____ Small Med Large XL XXL

Box Lunches (\$8 each) \$ _____ # _____ Fri _____ Sat _____ Sun (deli sandwich, chips, fruit, drink)

Total Enclosed \$ _____

Also, indicate size of the one free T-shirt.

Make check payable to **New Bedford Yacht Club**. Or provide credit card # with security code and expiration date (AMEX & Discover are not accepted). Mail with this form to: Scott Lindblom, 11 Smithfield Place, Dartmouth, MA 02748.
s-lindblom@sensata.com 508-878-2969