SOUTHERN MARYLAND SAILING ASSOCIATION

2005 SMSA RACE
ENTRY FORM
(Print Legibly)

Class: _____
Event Title: _____
Entry Fee: _____
Sanctioned Event #: _____

Sail #	Name of Yacht	Competitor's Name	CBYRA Membership #	Affiliate Yacht Club	Club Code #

Competitor's Name: _____

Address: _____
(Number and Street) (City) (State) (Zip Code)

E-mail: _____

Telephone Numbers: Home (_____)_____ Office (_____)_____

Handicap Classes (PHRF)
Class Rating _____
Make & Model _____
Hull Color _____
Score in Region _____

This yacht conforms in every way to her Class Rules and Measurements. Handicap rating (if applicable) is on file with Class Representative or Host Club, and is attached hereto.

Yes _____ **No** _____

Small Boat One Design Classes
Hull Color _____
Boat Type _____
Portsmouth No. _____
_____
_____

I agree to abide by the regulations and sailing instructions for this event. In consideration of being permitted to enter this event, being knowledgeable of the risks of competitive sailing and knowing that it is my sole responsibility to decide whether to enter or continue any race, I voluntarily assume the risk of participation in this event and release the Host Club, **the Southern Maryland Sailing Association, Inc**., and the people conducting the event from all liability in connection with any injury or damage that may occur.

Signature of Competitor _____ Date _____

NOTE: Membership in CBYRA, Class Association, and an affiliate Yacht Club are required PRIOR to earning any points toward CBYRA High Point Trophies.

(Failure to complete all pertinent blanks may cause rejection of entry).

Mail Entry Form to SMSA Race Governor or POC identified on the Special Sailing Instructions