Southern Maryland Sailing Association — Small Boat Program

ANNUAL RACE & REGATTA ENTRY FORM

Competitor's Full Name: _____

Address: _____

_____

Telephone: _____

email Address: _____

Your email address will be used only to notify you of SMSA Small Boat Program events. It will not be sold, traded, rented, or given to any non-SMSA personnel or other organizations.

Name of Boat: _____

Boat Class/Type: _____

Boat Color: _____

Sail #: _____

Sail # Mismatch Declarations: _____

Home Yacht/Sail Club: _____

Name(s) of Crew: _____

I agree to abide by the regulations and sailing instructions for this series of events. 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 SMSA and the people conducting the event from all liability in connection with any injury or damage that may occur.

_____

Signature of Competitor ***Date***

	Cost	Due
Annual Race Fee		
SMSA Member	$65	_____
Non-Member	$150	_____
		_____
		_____
		_____
		_____
		_____
		_____
TOTAL DUE:		

SBP Use Only

M NM ARF RRF

Amount Paid: _____

Cash Renewal

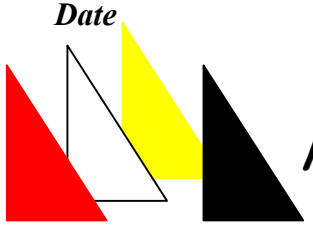
Check #: _____

Mail Registration & Entry Fee To:

Robert Herbig

PO Box 262

Solomons, MD 20688



Have Fun, Sail Fast

15 Jan 2009