

OFFICIAL ENTRY FORM
2018 Arms White Regatta

International Star Class
Yacht Racing Association

2018 Arms White Regatta
June 9 - 10, 2018
Milford Yacht Club, Milford, CT

1. **SKIPPER:** Name _____ Age _____
Address _____
Phone _____ Fax _____
E-mail _____
Yacht Club _____
Fleet _____
ISCYRA Membership: Life Active

2. **CREW:** Name _____
Address _____
Telephone _____
E-mail _____
Fax _____

3. **SAIL NUMBER** _____
Indicate national letter code and sail number.

4. **YACHT IDENTITY and CERTIFICATION**
Yacht Number _____
Yacht Name _____
Owner Name _____
Address _____
Telephone-Home _____
Telephone-Business _____
Fax _____

5. **CERTIFICATION:** I hereby certify the above entry to be correct to the best of my knowledge and that Skipper complies with eligibility STCR 26.
6. **DISCLAIMER OF LIABILITY:** Competitors participate in the regatta entirely at their own risk. See Rule 4, Decision to Race. The Organizing Authority and the Host Fleet will not accept any liability for material damage or personal injury or death sustained in conjunction with or prior to, during, or after the regatta.

SKIPPER

(Signature)

(Date)

7. Submit this Entry Form, by email to the fleet Secretary at cmorgan8765@gmail.com or at Registration on June 9, 2018:

8. Entry Fee of \$100.00 includes breakfast each morning, refreshments after each race day, dinner for Skipper and Crew on Saturday evening, June 9, 2018, and snacks and beverages during the Trophy presentation on Sunday, June 10, 2018.

Checks for Entry Fee should be made payable to "Mid CT Star Fleet."

Entry Fee (\$100.00) _____
Additional Dinner Reservations _____
Saturday Night (\$20.00 each) _____
Total Amount Enclosed _____