OFFICIAL ENTRY FORM 2019 Arms White Regatta

Yacht Racing Association

2019 Arms White Regatta June 8 - 9, 2018 Milford Yacht Club, Milford, CT	
	3. SAIL NUMBER Indicate national letter code and sail number.
Address	4. YACHT IDENTITY and CERTIFICATION
	Yacht Number
PhoneFax E-mail	Yacht Name
Yacht Club	Owner Name
Fleet	Address
	Telephone-Home
	Telephone-Business
	- Fax
2. CREW: Name	
Address	
Telephone	
E-mail Fax	
5. CERTIFICATION: I hereby certify the above entry to be correct to the be	st of my knowledge and that Skipper complies with eligibility STCR 26.
6. DISCLAIMER OF LIABILITY: Competitors participate in the regatta entire	
SKIPPER	
(Signature)	(Date)
	()
7. Submit this Entry Form, by email to the fleet Secretary at	Checks for Entry Fee should be made payable to "Mid CT Star Fleet."
<u>cmorgan8765@gmail.com</u> or at Registration on June 8, 2019:	Entry Fee (\$100.00)
8. Entry Fee of \$100.00 includes breakfast each morning, refreshments	Additional Dinner Reservations
after each race day, dinner for Skipper and Crew on Saturday evening,	Saturday Night (\$20.00 each)
June 8, 2019, and snacks and beverages during the Trophy presentation on Sunday, June 9, 2019.	Total Amount Enclosed
	1