

OCSA Race Entry Form

PLEASE COMPLETE THE ENTIRE FORM - FAILURE TO DO SO MAY SUBJECT BOAT TO DISQUALIFICATION

Race Event _____ Boat Name _____
Skipper's Name _____ Sail Number _____
Address _____ PHRF Rating/Fleet _____
Boat Type/Length _____
Home Phone _____ e-mail _____
Work Phone _____
Yacht Club _____ Racing Designation: (please check one)
Entry Fee Enclosed: _____ PHRF* Martin 24 Class
US Sailing Membership Number: _____ One-Design Cruising Class

***BOATS RACING UNDER PHRF HANDICAP SHALL HAVE A CURRENT 2010 PHRF RATING CERTIFICATE**

In consideration of acceptance of my participation in this event, I acknowledge and agree to the following: (1) My boat has a liability insurance policy currently in effect covering bodily injury and property damage with a per occurrence limit of liability of not less than \$500,000 and said policy does not exclude yacht racing activities. (2) I agree to be bound by the Racing Rules of Sailing of the International Sailing Federation including the national prescriptions of U.S. Sailing, as modified by the OCSA Sailing Instructions and the Race Notice and/or Supplemental Instructions for this event. (3) My boat will be subject to disqualification for interference with commercial traffic in accordance with the OCSA Sailing Instructions. (4) OCSA recommends all participating yachts comply with Category 4 safety requirements. (5) Skippers are responsible for their yachts compliance with USCG regulations.

SIGNATURE OF SKIPPER _____

Please mail or deliver to the Race Captain prior to the entry deadline indicated in the Race Notice. No on-the-water registrations will be accepted unless noted

OCSA Race Entry Form

PLEASE COMPLETE THE ENTIRE FORM - FAILURE TO DO SO MAY SUBJECT BOAT TO DISQUALIFICATION

Race Event _____ Boat Name _____
Skipper's Name _____ Sail Number _____
Address _____ PHRF Rating/Fleet _____
Boat Type/Length _____
Home Phone _____ e-mail _____
Work Phone _____
Yacht Club _____ Racing Designation: (please check one)
Entry Fee Enclosed: _____ PHRF* Martin 24 Class
US Sailing Membership Number: _____ One-Design Cruising Class

***BOATS RACING UNDER PHRF HANDICAP SHALL HAVE A CURRENT 2010 PHRF RATING CERTIFICATE**

In consideration of acceptance of my participation in this event, I acknowledge and agree to the following: (1) My boat has a liability insurance policy currently in effect covering bodily injury and property damage with a per occurrence limit of liability of not less than \$500,000 and said policy does not exclude yacht racing activities. (2) I agree to be bound by the Racing Rules of Sailing of the International Sailing Federation including the national prescriptions of U.S. Sailing, as modified by the OCSA Sailing Instructions and the Race Notice and/or Supplemental Instructions for this event. (3) My boat will be subject to disqualification for interference with commercial traffic in accordance with the OCSA Sailing Instructions. (4) OCSA recommends all participating yachts comply with Category 4 safety requirements. (5) Skippers are responsible for their yachts compliance with USCG regulations.

SIGNATURE OF SKIPPER _____

Please mail or deliver to the Race Captain prior to the entry deadline indicated in the Race Notice. No on-the-water registrations will be accepted unless noted