

# CALVES WEEK

7TH -10TH AUGUST

## 2012

### CALVES WEEK ENTRY FORM



SCHULL HARBOUR SAILING CLUB

Yacht Name \_\_\_\_\_ Sail Number \_\_\_\_\_

Boat Model \_\_\_\_\_ Hull Colour \_\_\_\_\_

Please Indicate: White Sail  Cruisers

Handicap: IRC  ECHO

#### OWNER / HELMSMAN DETAILS

Surname \_\_\_\_\_ Forename \_\_\_\_\_

Address 1 \_\_\_\_\_

Address 2 \_\_\_\_\_

City \_\_\_\_\_ Country \_\_\_\_\_

Home Tel \_\_\_\_\_ Mobile \_\_\_\_\_

E-Mail \_\_\_\_\_

Sailing Club \_\_\_\_\_

#### ENTRY FEE AND PAYMENT:

Calves Week Series.....

Yacht Length .....

I enclose my cheque

/ bank draft for ... \_\_\_\_\_ Euro

BOAT LENGTH / CLASS	CALVES WEEK ENTRY	LATE ENTRY AFTER 1ST JULY
30 ft and under	135 euro	160 euro
Over 30ft to under 36 ft	160 euro	180 euro
36ft and over	185 euro	210 euro

#### Entries by July 1st 2012

**Schull Harbour Sailing Club, The Post Office, Schull, Co. Cork.**

I confirm that I am a current member of a category one yacht club and that I am over 18 years of age. As a condition of my entry being accepted, I agree that the safety of the above yacht and her crew is at my sole and exclusive risk and in particular acknowledge that it is my sole responsibility to decide whether to start or to continue to race. I voluntarily assume the risks associated with taking part in the event and I agree to indemnify the organizers, their servants or agents against any claim arising out of my yacht's entry in this series. I confirm that the above yacht is adequately insured for third party claims. I wish to enter the above named yacht in the series and I agree to be bound by the Rules of the event.

**By submitting this form you confirm that you have adequate insurance in place**

Signature: \_\_\_\_\_