



SQUAN TRI-SAIL OFFSHORE REGATTA

A Regatta of the New Jersey State Championship

2008 Entry Form

Mail to: Squan Tri-Sail Regatta, PO Box 75, Bay Head, NJ 08742

Yacht Name _____ Sail Number _____

Designer/Class _____ PHRF Rating _____ LOA _____

Owner's Name _____ Yacht Club/Assoc. _____

Address _____

City _____ State _____ Zip _____

Home # _____ Office # _____

Fax # _____ E-Mail _____

Captain's Name (if different from above) _____

I wish to enter PHRF Spinnaker _____ PHRF Non Spinnaker _____

Sandpiper _____

PHRF Entries must be accompanied by a copy of a current, valid PHRF-MA Certificate _____

US Sailing Membership # Owner/Helmsman _____ **MANDATORY**

Entry Fees:\$90.00

Inshore\$45.00

MRYC Mt. Gay Cocktail Party/Dinner

No. in Party _____ \$30.00 per person— Cocktails & Dinner

No. in Party _____ \$5.00 per person— Cocktails Only

(Non-refundable) Total Amount \$ _____

Make all checks payable to: Squan Tri-SailAmount Enclosed _____
and mailed to P.O. Box 75, Bay Head, NJ 08742

Waiver and Release of Liability:

I understand that the safety of my yacht and that of her crew, and the decision whether or not to start or continue to race, are my responsibility and not that of the Squan Tri-Sail Committee. In consideration of the acceptance of this entry, I for myself and my heirs, legal representative, successors and assigns, hereby hold harmless and waive any and all claims which I and any of them may at anytime have against the Squan Tri-Sail Regatta, its officers, members and any of their employees and agents arising out of participation and the participation of my yacht and any accompanying tender in this event.

Signature of Owner / Charter

Date

Print Name

This form, along with your registration fee, must be completed, signed, and returned in order to receive your race packet.