

**AUSTRALIAN EC 12 CHAMPIONSHIPS
ENTRY FORM**

Entrant

Name _____

Address _____

_____ Postcode _____

Telephone / Fax / E-mail _____

Name of Club _____

Frequencies

Minimum of three _____

Please provide more if available _____

Boat Details

Sail Number _____ Boat Registration Number _____

Design _____ Designer _____

Boat Name _____ Hull Colour _____

Sail Maker _____ Sail Winch _____

Indemnity

I agree to abide by the conditions of the event as contained in the Notice of Race, Sailing Instructions, the Racing Rules of Sailing and any Notices published by the Sailing Committee.

All entrants taking part in this event do so entirely at their own risk:

The Australian Radio Yachting Association (Incorporated) the State Radio Sailing Association, organizing club(s) and any other parties involved in the organization of this event disclaim:

Any and every responsibility whatsoever for loss, damage, injury or inconvenience that might occur to persons and goods, both ashore and on the water as a consequence of entering or participating in this event. At all times the responsibility for the safety and themselves plus the decision to participate or continue must rest with the competitor. By entering the event it is deemed that you accept these conditions.

Competitor's signature. _____ Date _____