

ROUND GRENADA REGATTA 20 & 21 AUGUST 2016

REGISTRATION FORM

Yacht Name:	tht Name: Name of Skipper:		
Address:			
Tel:	E-mail:		# of Crew:
Yacht Type/Design:		Year of Hull:	Hull Colour:
Sail Number:	Length Overall:	Rig type (sloop	p, schooner, yawl, ketch) :
Are you looking for crew? Yes_	No		
Do you want dockage at Le P	hare Bleu Marina? (Frida	y & Sunday - 2 nights for 1 sp	pecial!) Yes No
If yes,Arrival date:	Departure date:	(Note: regul	ar rates apply for additional nights)
Do you want dockage/moorin	ng at Carriacou Marine?	(limited availability) Yesl	No If yes, D or M?
By entering this event and co	mpleting this Registration	on Form, I, the undersign	ed, agree as follows:
Entry Fee: To pay an entrance fee	e of \$100 ECD.		
Disclaimer: I agree and accept th	at the Petite Calivigny Yacht	: Club, the race committee, o	organizing authority, jury, sponsors and/or
supporters, are not liable and shal	ll not in any way be held res	sponsible for any personal inj	ury or material damage that might result from
my participation, and that of my c	rew, in this regatta.		
Permission: I hereby give permiss	ion to the organizing autho	rity of the Round Grenada R	egatta and its assigns to use or authorize others
to use my name, photographs, rec	ordings, data or any other r	record of my participation in	this regatta for any legitimate purpose without
restriction as to frequency or dur	ation, and without the right	to compensation.	
I agree to be bound by the Racing	Rules of Sailing and the Sai	ling Instructions of this Regar	tta.
Signed:		Date:	
Owner or Owner's Repres	sentative		

Kindly email completed Registration Form by 18th August 2016 to: info@pcycgrenada.com

PETITE CALIVIGNY YACHT CLUB