



ROUND GRENADA REGATTA 20 & 21 AUGUST 2016

REGISTRATION FORM

Yacht 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, schooner, yawl, ketch) : _____

Are you looking for crew? Yes _____ No _____

Do you want dockage at Le Phare Bleu Marina? (Friday & Sunday - 2 nights for 1 special!) Yes _____ No _____

If yes, Arrival date: _____ Departure date: _____ (Note: regular rates apply for additional nights)

Do you want dockage/mooring at Carriacou Marine? (limited availability) Yes _____ No _____ If yes, D or M? _____

By entering this event and completing this Registration Form, I, the undersigned, agree as follows:

Entry Fee: To pay an entrance fee of \$100 ECD.

Disclaimer: I agree and accept that the Petite Calivigny Yacht Club, the race committee, organizing authority, jury, sponsors and/or supporters, are not liable and shall not in any way be held responsible for any personal injury or material damage that might result from my participation, and that of my crew, in this regatta.

Permission: I hereby give permission to the organizing authority of the Round Grenada Regatta and its assigns to use or authorize others to use my name, photographs, recordings, data or any other record of my participation in this regatta for any legitimate purpose without restriction as to frequency or duration, and without the right to compensation.

I agree to be bound by the Racing Rules of Sailing and the Sailing Instructions of this Regatta.

Signed: _____ Date: _____

Owner or Owner's Representative

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

PETITE CALIVIGNY YACHT CLUB

Website: www.pcygrenada.com Facebook: www.facebook.com/PCYCGrenada