International Flying Fifteen 55th Australian National Championship Friday 30th December 2016 to Thursday 5th January 2017 Esperance Bay Yacht Club

ENTRY FORM

Please accept my entry to the International Flying Fifteen 55th Australian National Championship to be conducted from the Esperance Bay Yacht Club from Friday 30th December 2016 to Thursday 5th January 2017

Boat's Name:					
Sail Number:		Hull Colour:]
Fleet:					
Skipper's Name:				or YA r Card N <u>o</u> :	
Address:					
Phone Numbers:	Mobile	Home			
Email Address:					
Emergency Contact:	Name		Phone Nu	mber	
Crew's Name:				or YA r Card No:	
Address:					
Phone Numbers:	Mobile	Home			/
Email Address:					
Emergency Contact:	Name		Phone Nu	mber	
Ages at 30.12.16 (Required for trophy eligibility)	Skipper	Years	Crew		

Participants under 18 must submit a Parent/Guardian/Custodian Consent form at or before registration - see attached "I agree to be bound by the Racing Rules of Sailing and by all other rules that govern this event. I acknowledge that rule 4 – Decision to Race, places the sole responsibility for a boat deciding to participate in a race or to continue racing as hers alone and that competitors participate in the regatta entirely at their own risk. I accept that no responsibility will be accepted by Flying Fifteen International Australia Inc., Flying Fifteen International Western Australia Inc., Esperance Bay Yacht Club Inc., sponsors, regatta officials or volunteers, or staff conducting the regatta or any person connected with the regatta for any loss or damage to personal property or for personal injury or death sustained in conjunction with or prior to, during, or after the regatta. I confirm the insurance cover requirements stated in item 16 of the Notice of Race are current and will remain in force during the regatta.

Date:

Date:

To Be Signed at Registration if completed on-line.

Signature skipper:	
	(If under 18 years, parent or Guardian to sign)
0	

Signature crew:

(If under 18 years, parent or Guardian to sign)

International Flying Fifteen Esperance Bay Yacht Club

ORDER AND PAYMENT FORM

The entry fee for the regatta is \$380, which includes the costs of entry to the regatta, two tickets to attend the Welcome Function and Presentation Dinner. Additional tickets to the Welcome Function and Presentation Dinner may be ordered and must be paid for together with the entry fee. Spectators and visitors not directly associated with a participating boat can also utilise this form for registering and paying for regatta functions. Spectator and visitors should also provide their contact details on this form

Helm/Spectator/Visitor Name					Phon	e Number		
Helm/Spectator/Visitor Email Address								
Sail Number						Each	Number	Total \$
Entry Fee (includes nomination and two ticket	s to Pres	sentati	on Dinn	er & Welcor	ne			
Welcome Drinks Friday (2 tickets per boat included) – Extra Tickets								
Friday and Saturday Night meals – Paya essential. Call Stuart Mathews of Saltwa					5			
Seafood Under The Stars (includes food	only – I	Drink	s BYO)				
Seafood Under The Stars (Children under 14)								
Sundowner at Stonehenge (includes bus	, entry,	nibble	es) Cas	sh Bar at e	vent			
Sundowner at Stonehenge (Children un	der 14	ticket	ts)					
Presentation Dinner (two tickets per boat	include	ed wit	h entry) – Extra ti	ckets			
Men's Shirts - Quantity in S M	L)	(L	XXL				
Ladies Shirts – Quantity in 8 10	12	14	16	18				
Late Fee (if applicable) for entries after T	uesday	/ 22 nd	Novem	ıber				
Lunch for 5 days \$50 per competitor. Complete order form and return with entry								
Total amount payable						\$		

This entry form shall be lodged with the Regatta Secretary, Toni Hawkins (0427 594278) preferably by email to robntoni@wn.com.au by fax to 9071 4366 or posted to PO Box 987, Esperance 6450 by Tuesday 22nd November, 2016

An invoice will be issued to you via your nominated process with payment options including direct deposit, credit card or cheque payment. Please Note: Entries will not be confirmed or shirts ordered until payment is made.

I prefer to receive my invoice via;

Email	(email address)
Fax	(fax number)
Post	_ (postal address)

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LUNCH ORDER FORM

\$50 per person for 5 days

Sail Number _____

 Helm Name_____
 Crew Name _____

\$10 per person per day - Includes one roll, one drink and one piece of fruit or chocolate per person per day. Additional rolls \$7 each, additional drinks \$2 each, additional fruit/chocolate \$2 each

Choose roll filling, drink type and fruit or chocolate bar for each person each day

Menu	Sat 31 st Dec (Write Number of Items Required)	Mon 2 nd Jan (Write Number of Items Required)	Tue 3 rd Jan (Write Number of Items Required)	Wed 4 th Jan (Write Number of Items Required)	Thu 5 th Jan (Write Number of Items Required)
Ham and Salad Roll					
Chicken and Salad Roll					
Egg and Salad Roll					
Cheese and Salad Roll					
Tuna and Salad Roll					
Water					
Lemon Squash					
Coke/Pepsi					
Coke Zero					
Fruit					
Chocolate Bar					