

**1999 INTERCLUB DINGHY NATIONAL CHAMPIONSHIP
OFFICIAL ENTRY FORM**

SAIL NUMBER _____ HULL COLOR _____

BOAT NAME _____

FLEET _____

SKIPPER'S NAME _____

Address _____

City _____ State _____ Zip _____

Phone W (____) _____ Phone H (____) _____ e-mail _____

CREW'S NAME _____

Address _____

City _____ State _____ Zip _____

Phone W (____) _____ Phone H (____) _____ e-mail _____

NEED HOUSING: Y N

NEED BOW NUMBERS: Y N

ENTRY FEE - \$70.00: \$ _____

LATE ENTRY FEE - \$15.00 (If post-marked after April 1): \$ _____

EXTRA DINNER TICKETS - Number __ x \$20 each: \$ _____

TOTAL ENCLOSED: \$ _____

The skipper agrees that any assistance from the Race Committee, the crash boats or other Severn Sailing Association vessels and from persons manning them is at his/her own risk. Further, he/she releases the Severn Sailing Association, its members, its employees, its race committee and crash boat crews, whether members of SSA or not, from all liability or claims for personal injury or property damage suffered in any way or from any cause during or related to this regatta.

Signature of Skipper: _____ Date: _____

Please make check payable to Annapolis InterClub Fleet. Mail entry form and check to:

Alex Pline
305 Monterey Avenue
Annapolis, MD 21401
pline@snipe.org