



Sanctioned 21 October 2019

ENTRY FORM - SAS MIRROR NATIONALS 2018

The Regatta Secretary

SAS Mirror Nationals 2018
PO Box 76
Villiersdorp
6848
Email: info@mirror.org.za

| | | |
|----------------|---|-------------------------|
| Account Name | : | Theewater Sports Club |
| Bank | : | ABSA |
| Branch Code | : | 632 005 |
| Account Number | : | 4084 563 616 |
| Reference | : | SASMN / Name of Skipper |

In terms of the published Notice of Race for the above event, please enter the following yacht in the above SAS Mirror Nationals 2019.

PLEASE PRINT CLEARLY

Yacht Details

Name: Class: Mirror

Category: N/A Sail Registration Number:

Reg. / Measurement Certificate: No: Issued By:
Date.....

(Enclose copy with Entry Form)

Registered Owner: Class Member: Yes / No

Club of which a member SAS Membership No.

Name of Helmsman: SAS Membership No:

Contact Tel No: E-mail address:

Date of Birth: Club of which a member:

Name of Crew:

SAS Membership No:

Date of Birth :

Club of which a member:

I am a member in good standing of the Mirror Class Association.

I enclose my Entry Fee as detailed in the Notice of Race for R 550 / R 750

This Entry form along with a scanned copy of the deposit slip, are to be e-mailed to info@mirror.org.za

I declare, by my signature, that:

- *I agree that competitors sail entirely at their own risk and agree that none of the organizations or persons concerned in the running of the SAS Mirror Nationals accepts liability for damages or injury suffered at any time during the period of, or as a result of the Championships.*
- *I agree to be bound by the World Sailing (WS) Racing Rules 2017-2020, the World Sailing Equipment Rules of Sailing 2017-2020, the Requirements for SAS National Championships, the Notice of Race, the Sailing Instructions and the Class Rules of the Mirror Class*
- *No alterations that could affect the Measurement / Registration Certificate have been made since the certificate was issued.*
- *The information provided in this entry form is to the best of our knowledge correct.*
- *I am competent to handle a yacht in adverse conditions.*
- *I confirm that I am fully aware of SAS and Class Rules and Regulations governing the wearing and / or carrying of safety equipment in the yacht and that the yacht entered, complies with the minimum buoyancy requirements.*

Signed:

Owner / Skipper (Parent or Guardian if a minor) Date:

Address:

Telephone:

Fax:

Mobile:

E-mail address (Please print clearly):

PLEASE NOTE: INCOMPLETE FORMS WILL NOT BE ACCEPTED

For Office Use:

Date Received:

Class:

Date Captured: