

2019 BILL NELSON OFFSHORE RACE ENTRY FORM

(ENTRY FORM DEADLINE 7TH FEBRUARY 2019)

BOAT, SKIPPER & CREW DETAILS		
BOAT NAME:	SAIL NO:	DP NO:
DIVISION: (PLEASE CIRCLE) IRC / CLUB	TCC NO:	NUMBER OF CREW:
SKIPPER'S NAME:	HOME TELEPHONE:	
POSTAL ADDRESS:	MOBILE TELEPHONE:	
EMAIL ADDRESS:	SKIPPER NATIONALITY:	
NEXT OF KIN NAME & RELATIONSHIP:	NEXT OF KIN CONTACT	
SKIPPER PASSPORT NO:	DATE OF BIRTH:	SKIPPER RESIDENT COUNTRY
BRIEF DESCRIPTION OF BOAT (I.E SPONSOR, RECENT SUCCESSES, HISTORY IN RACE) TO BE USED IN RACE PR.		

Please ensure attached with your entry are the following and email to sailingadmin@doscuae.com

- Complete crew list (attached)
- A copy of the boats valid IRC certificate (if applicable)

SKIPPER DECLARATION

I understand this entry is subject to approval by the organizing committee including assignment of division.

I shall ensure my boat is fully compliant with category 3 of the ISAF special offshore regulations without life raft.

I hereby acknowledge that the organizing committee will not accept liability for material damage or personal injury or death sustained in conjunction with or prior to, during or after the race.

I agree to be bound by the prescriptions of the race notice of race and sailing instructions.

SKIPPER SIGNATURE

PRINTED NAME

DATE

BOAT NAME: _____

CREW LIST

CREW MEMBER NO:	
Name:	Contact No.:
Nationality:	Date of Birth:
Passport No.:	Resident Country:
Next of Kin name & Relationship:	Next of Kin contact:

CREW MEMBER NO:	
Name:	Contact No.:
Nationality:	Date of Birth:
Passport No.:	Resident Country:
Next of Kin name & Relationship:	Next of Kin contact:

CREW MEMBER NO:	
Name:	Contact No.:
Nationality:	Date of Birth:
Passport No.:	Resident Country:
Next of Kin name & Relationship:	Next of Kin contact:

CREW MEMBER NO:	
Name:	Contact No.:
Nationality:	Date of Birth:
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