

ENTRY FORM

DOUBLE ANGLE RACE SEPTEMBER 8TH, 2007 ELKHORN YACHT CLUB

BOAT NAME: _____ SAIL NUMBER: _____

PHRF RATING: _____

CLASS TYPE/MAKE OF VESSEL _____

COLOR OF VESSEL, HULL, DECK _____

OWNER'S NAME _____

HOME PHONE _____ MOBILE PHONE _____

NUMBER OF CREW _____ ENTRY FEE \$65. BY AUGUST 31ST

LATE ENTRY FEE \$100. CAPTAIN'S DINNER IS INCLUDED! EXPECTED NUMBER OF
ADDITIONAL DINNERS, \$15 EACH _____

(Dinner includes appetizers, salad, main course, and desert. Pay for dinner at the door) I AGREE

TO BE BOUND BY THE RULES THAT GOVERN THIS EVENT

SKIPPER'S SIGNATURE: _____

SEND CHECK, WAIVER, AND ENTRY FORM TO:

ELKHORN YACHT CLUB
2370 HIGHWAY ONE
MOSS LANDING, CA 95039