



FREMANTLE SAILING CLUB

2011 INSHORE WINTER SERIES

NOMINATION FORM

FREMANTLE SAILING CLUB
 PO Box 860
 FREMANTLE WA 6959
 Telephone: (08) 9435 8809
 Fax: (08) 9336 2020
 Internet: www.fsc.com.au
 Email: activities@fsc.com.au

Boat Name: _____ Sail Number: _____
 Class: _____ DPI Reg. N^o: _____

Division (Please Mark with an X)

Division
0, 1, 2, or 3

Division
Multihull

Division
JaM

**Division
Sportsboats**

Current IRC Rating: _____ Validation Date: _____

OWNER'S DETAILS:

Surname: _____ Given Names: _____
 Address: _____
 Email: _____
 Home: _____ Work: _____ Mobile: _____
 FSC Member N^o: _____ YA Silver Card N^o: _____ RST N^o: _____

PERSON IN CHARGE'S DETAILS (IF DIFFERENT TO OWNER):

Surname: _____ Given Names: _____
 Address: _____
 Email: _____
 Home: _____ Work: _____ Mobile: _____
 FSC Member N^o: _____ YA Silver Card N^o: _____ RST N^o: _____

DECLARATION

I, _____ certify that all information supplied on this entry form is true and correct and that:

- a) I have read, understood and the yacht on this form complies with the Yachting Australia Special Regulations (2009-2012) requirements for Category 6 Safety for boats racing off Fremantle Sailing Club and in the Owen Anchorage. Mark with (X)
- b) holds a current IRC Rating (*if applicable*) and that all sail markings and equipment conform with those ratings as issued. Mark with (X)
- c) this boat is seaworthy in hull, rig and gear, and will be manned by a competent crew. Mark with (X)
- d) this boat has a comprehensive insurance policy including third party liability cover with a minimum of \$10 million for any single incident and that this cover will remain in force throughout the period that I am competing in any of the series shown above. Mark with (X)

Signed: _____ Date: _____
Owner / PIC / Owner's Representative

PLEASE NOTE: This entry will not be accepted unless ALL the relevant information above is supplied AND kept up-to-date if at any time changes occur. (FSC Sailing Instructions Paragraph 5.2)



2011 WINTER SERIES FREMANTLE SAILING CLUB INSHORE HANDICAP APPLICATION

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Please complete if you have not raced at Fremantle Sailing Club in the 2010-11 season.

VESSEL DETAILS:

Boat Name: _____ Sail Number: _____
Division: _____ Boat Safety Category: _____ Compliance Card N^o: _____

OWNER (1) DETAILS:

Surname: _____ Given Names: _____
Email: _____
Home: _____ Work: _____ Mobile: _____

OWNER (2) DETAILS:

Surname: _____ Given Names: _____
Email: _____
Home: _____ Work: _____ Mobile: _____

If more than two owners, please include additional owners' details on a separate sheet.

MEASUREMENTS AND DESCRIPTION:

Boat Description: _____ E.g. Viking, S97
Designer: _____ Year Launched: _____

Measurements to the nearest 0.01 Metres.

HULL: LOA: _____ LWL: _____ BMAX: _____
DRAFT: _____ DSPL: _____ Kgs
MAIN: P: _____ E: _____ N^o of Battens: _____
HEADSAIL: N^o 1 J: _____ I: _____ Max LP: _____
RIG: Fractional Masthead Sloop Ketch
SPINNAKER: SPL: _____ SL: _____ SMW: _____

Height of Spinnaker Halyard if greater than I: _____

If Fractional Rig, does it carry a masthead spinnaker? Yes No

Do you carry an Asymmetrical Spinnaker? Yes No

Current Handicap/Rating if known: _____ In Division: _____ Club: _____

Last known FSC PHS Inshore Handicap: _____ In Division: _____

Yachting WA Handicap: _____ IRC Rating: _____

Other: _____ Please describe: _____

DECLARATION: I declare that, to the best of my knowledge, the above information is true and correct and undertake to notify the Inshore Race Committee of any changes made to the above yacht's hull, rig, ballasting or sails which could affect its measurement.

SIGNED: _____ **DATE:** _____