

PRE-REGISTRATION FORM

Snipe New England Championship Regatta

SAIL NUMBER _____ BOW NUMBER _____

HULL NUMBER _____ HULL COLOR _____

Boat Name _____

Fleet _____

SKIPPER'S NAME _____

Address _____

City _____ State _____ Zip _____

Phone W (____) _____ Phone H (____) _____

CREW'S NAME _____

Address _____

City _____ State _____ Zip _____

Phone W(____) _____ Phone H (____) _____

ENTRY FEE \$70.00 _____

I agree to be bound by the Racing Rules of Sailing and all other rules that govern this event.

Skipper's Signature: _____ Date _____

Please make check payable to **Jubilee Yacht Club**. Mail entry form and check to:

Snipe New England Championship
Jubilee Yacht Club
Water St.
Beverly, MA 01915