

RACE COMMITTEE  
 280 Yacht Club Way  
 Redondo Beach, CA 90277-2049



Phone: (310) 376-2459  
 Fax: (310) 374-5848  
 Website: khyc.org

## RACE ENTRY FORM

Please enter my boat in your		race(s)
Skipper(s)		Boat Name
Sailing/Yacht Club:		Sail Number
Boat Type: (i.e. Cal 20, Cal 25, Capri 25, Hobie 33 Nacra 5.8, Farr 30, etc.)		

### Class:

<input type="checkbox"/>	<b>PHRF Ratings:</b>	(Buoy)_____ (RLC)_____ (OWC)_____ (SO+)_____
<input type="checkbox"/>	<b>Portsmouth Ratings:</b>	(1)_____ (2)_____ (3)_____ (4)_____ (5)_____
<input type="checkbox"/>	<b>One Design:</b>	_____ <input type="checkbox"/> <b>Other:</b>

**Any entry forms that are incomplete, illegible, incorrect, or late may be rejected.**

I/we agree to conform to all the rules and regulations of King Harbor Yacht Club and to comply with the US Sailing Association and other rules under which this race or series of races will be sailed. I/we agree to hold King Harbor Yacht Club, its Officers, Directors, and committee persons harmless of any liability of any nature whatsoever which may arise during the above described event for accident or injury or otherwise to myself, my crew, my guests or my boat. I/we hereby certify that I/we are able to swim. The entrant hereby agrees to abide by the decisions of the Race Committee and Protest Committees. I/we agree to notify the King Harbor Yacht Club by telephone, radio or in person, **immediately upon withdrawal from the race.**

<b>Signed:</b>	<b>E-Mail:</b>
_____	_____
<i>Skipper/Owner</i>	<i>(for race results)</i>
<b>Home Phone:</b>	<b>Cell Phone:</b>
_____	_____
<b>Address</b>	<b>City State Zip Code</b>
_____	_____

<b>Fee Paid: \$</b>	<b>Entered Scoring Master File:</b>	<b>Notes:</b>
_____	_____	_____