

2006 Singlehanded Transpacific Race
EPIRB and Emergency Contact

Boat name: _____

Skipper's name: _____

Required information:

EPIRB make & model: _____

Serial number: _____ Battery expiration date: _____

Registered primary emergency contact: _____

Address: _____

Phone: (day) _____ (evening) _____

Email : _____

Registered secondary contact: _____

Phone: (day) _____ (evening) _____

If you are borrowing or renting an EPIRB:

Owner: _____

Phone: (day) _____ (evening) _____

Please attach a copy of your EPIRB registration to this form.

SSB/Ham - type of radio and call sign:

Optional Information:

Sat Phone - type of phone and phone number:

E-mail - type of connection (eg Orbcomm, SailMail) and e-mail address:

Note: This sheet must be completed and received by the Singlehanded Transpacific Race Committee no later than June 9, 2006.

*Singlehanded Sailing Society
P.O. Box 457
Alameda, CA 94501*