

SINGLEHANDED SAILING SOCIETY 2010 Singlehanded TransPacific Yacht Race Application for Race Entry

Skipper's Name	_			
Address				
City, State, Zip				
Home PhoneV		Wo	rk Phone	
Cell PhoneE		E-m	mail	
Please Note:	The Race Committee will	l contact race entrar	its by e-mail unless ar	nother contact method is requested.
Shirt/Jacket Size:	S-M-L-XL-XXL			
Yacht Name			Sail #	
Yacht Model			Hull # (if shown)	
Hailing Port			Year Built	
Where Berthed, incl. Slip #			Doc. or State Re	g
Type of Rig			Length on Deck	
Construction Materia	l		Length Waterline	
Hull Color / Deck Color			Draft	
Local PHRF/Multihull Rating			Beam	
NorCal PHRF/BAMA Rating			Displacement	
Yacht Club Affiliation	(optional)			
In case of an emerge	ency, please contact the fol	lowing person:		
Name:		_ Cell phone:		Email:
Address:				
Additional contact inf	ormation:			
Race, Race Rules & provisions of the abo cause them to compl	Conditions and Sailing Inst ve documents and all other y with, all of the provisions	tructions, including a r rules under which t of the above docum	any amendments there this race is sailed. I ag nents, with particular re	tered yacht in accordance with the Notice of etc. I further agree to comply with all of the gree to advise my shore contacts of, and eference to Notice of Race paragraph 7 g) and paragraph 11 (Outside Assistance).
Skipper's Signature				Date

The Race Committee must receive complete applications for race entry and full payment of entry fees no later than April 17, 2010. Please refer to paragraph 2.04 of the Race Rules and Conditions regarding what constitutes a completed entry application. The Race Committee will notify an applicant of provisional acceptance or non-acceptance as soon as possible after receipt of entry. (RRC 2.09, 2.10) Please mail applications and other documents to: Singlehanded TransPac 2010, c/o Bob Johnston, 467 Panorama Drive, Benicia, CA 94510-3901. Alternatively, all documents may be e-mailed to the Race Committee at: SHTransPac@yahoo.com.

SINGLEHANDED SAILING SOCIETY 2010 Singlehanded TransPacific Yacht Race Sailing Experience

Skipper's Name:	
Yacht's Name:	_
Please describe your previous ocean racing or cruising experience including y made, ports entered, wind and sea conditions and any other information which experience:	yachts sailed, position (Skipper, crew, etc.), passages h would help the Race Committee assess your sailing
If you have not yet completed your Qualifying Cruise (ref. RR&C Rule 9), when	n and where do you expect to do so?
Skipper's Signature:	Date: