

ST. AUGUSTINE YACHT CLUB

RACE OF THE CENTURY

DATE: May 26, 1985

0900 SKIPPERS MTG

YACHT NAME _____ HOME PORT _____

MANUFACTURED BY _____ LENGTH _____ SAIL # _____

SKIPPER _____ RADIO CALL _____

ADDRESS _____ PHONE _____

EMERGENCY CONTACT _____ PHONE _____

NAMES OF CREW 1 _____ 2 _____

3 _____ 4 _____

5 _____ 6 _____

PHRF RATING _____ SPINNAKER - YES/NO (CIRCLE ONE)

ENTRY FEE SAYC MEMBERS \$15.00 NON-MEMBERS \$18.00

BARBECUE RESERVATIONS: \$8.50/Person SAT EVE. HOW MANY? _____

Buffet Reservations \$9.25/Person Sun. Eve. How Many? _____

I hereby acknowledge that I as skipper accept the sole responsibility for safety aboard my yacht and I expressly agree that The St. Augustine Yacht Club is not liable, under any circumstances, for any loss or injury to participants or others or for the loss or damage to any yacht. I agree to indemnify and hold harmless The St. Augustine Yacht Club and the Race Committee from and against all losses, costs, damages, attorney's fees and liability of any kind or nature whatsoever growing out of or resulting from my participation in this race.

SIGNED _____ DATE _____

Return ASAP to:

St. Augustine Yacht Club
Camachee Island
St. Augustine, Florida 32084
Ph: 824-9725