



SUNSTROKE SERIES

Sponsored by D.I.S.C. Sports and Spine Center
Hosted by South Coast Corinthian Yacht Club
Marina del Rey, California USA

ENTRY FORM

Thursdays, May 6 – August 26, 2010

Individual race night entry fee:

With US Sailing membership: \$6

Without US Sailing membership: \$7

Series (17 races!) entry fees:

Double-handed classes with US Sailing membership	\$65	Single-handed classes with US Sailing membership	\$45
Double-handed classes w/out US Sailing membership	\$75	Single-handed classes w/out US Sailing membership	\$55

Double-handed under 18 yrs of age	\$45
Single-handed under 18 yrs of age	\$30

Information about joining US SAILING is available at www.ussailing.org or at 800.877.2451.

Entries may be delivered by hand to the race entry box at the bottom of the SCCYC Stairs or by mail to:

South Coast Corinthian Yacht Club
13445 Mindanao Way
Marina Del Rey, CA 90292
Attn: Sunstroke Series Entry

2010 Sunstroke Series Entry Form

Sail No. _____ Class _____

Club Affiliation _____

Circle one: Series Entry or One Day Entry

Boat Name _____

Skipper _____

Crew _____

Address _____

City/Zip _____

Phone (day) _____ (eve) _____

E-mail Address _____

US SAILING membership # _____

I recognize that the sport of sailing entails certain inherent risk; that I (not SCCYC or other organizing authorities of this event) am solely responsible for the condition and operation of the boat that I am entering; that, as skipper, I bear responsibility for determining whether or not conditions warrant participation or continuation. I agree to hold SCCYC and other organizing authorities of this event, their members, officers, directors and committee harmless from all liabilities for damages to my boat, myself, others and crew while using the club facilities or engaging in this event. I agree to conform to and comply with all rules and regulations governing this event and the safety requirements of the United States Coast Guard.

Signature (Skipper) _____

Parent/Guardian Name (If Entrant Under18):

Parent/Guardian Signature

Date _____

Office use only: Amt _____ / cash or check / Date rcd _____