

The Sailing Administrator
L.M.Y.C Sailing Committee
Date _____

RE: YACHT REGISTRATION

Please register the following vessel on the L.M.Y.C Yacht Register

Vessel Name _____
RMS(formerly MSB) No _____ Yacht Design _____
LOA _____ Draft _____ Beam _____ LWL _____ Rig Type _____

Propellor type:- fixed/ folding/feathering Number of blades _____
CIRCLE ONE

Variations from Standard Design if any:-

-
1. I wish to carry Sail No. _____ OR Please allocate a Club Number. (Sail No's shall be one colour only contrasting with the sail colour. The letter M, if applicable shall appear above the sail no. Non prefixed sail numbers shall be available through Yachting NSW)
 2. Please register the yacht in the following name(s) all of whom are currently Ordinary Sailing Members of L.M.Y.C.

Name _____

LMYC Member No. AS (formerly YA) member No.

Name _____

LMYC Member No. AS (formerly YA) member No.

Address/s _____

Ph: (h) _____ (w) _____

Mobile: _____ Email: _____

3. I intend to race*/ not race.

*Please allocate the boat to a racing division and assign a TCF for:-

SATURDAY- SPINNAKER/NON SPINNAKER-WEDNESDAY-FRIDAY TWILIGHT-WINTER

Circle one or all that you intend to compete in

Mast Height _____ Mainsail Area _____

Largest Genoa area _____ Largest Spinnaker area _____

4. In the event of accident or damage involving the registered yacht, please contact if not one of the above:

Name _____

Address _____

Ph: (h) _____ (w) _____

Mobile: _____

5. I will complete a Crew Declaration Form prior to racing.

6. ALTERATIONS OR ADDITIONS TO THE ABOVE INFORMATION SHALL BE NOTIFIED IN WRITING TO THE SAILING ADMINISTRATOR racing@lmyc.com.au

OFFICE USE ONLY
Sail No. Allocated _____
Member Notified _____
RMS Registration _____
Division/TCF _____

SIGNATURE

SIGNATURE