



VANGUARD 15 TEAM RACE

AUGUST 28-29, 2010

ENTRY FORM

FAX or EMAIL or POSTMARKED Entry by MONDAY, AUGUST 16

Team Name: _____

Team Captain: _____

Telephone Number: _____ (day)

_____ (eve)

Email address: _____

Number of Team Members: 6

Entry Fee (\$300) (includes BBQ dinner – please check payment method and provide details)

_____ NYYC Member Account # _____

_____ Check payable to “New York Yacht Club” due at registration

_____ Credit Card type: _____ # _____ Exp _____

Name on Credit Card: _____

Number of additional dinners @ \$35.00 each: _____

Please provide the names of those who are sailing

Skipper _____ Email _____ Age _____

Crew _____ Email _____ Age _____

Skipper _____ Email _____ Age _____

Crew _____ Email _____ Age _____

Skipper _____ Email _____ Age _____

Crew _____ Email _____ Age _____

Please be aware that ALL people sailing MUST sign a waiver at registration.

New York Yacht Club Sailing Office
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E-Mail: dugganb@nyyc.org