

*** Please hand this completed form to the Race Officer or TopYacht operator in person ***

Clear BLOCK LETTERS Please

Series /Event Name																																						
SKIF	SKIPPER: First Name														Last Name																							
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Class Name																																						
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Re	Replace with Sail No (Spinnaker)																																					
Foi	For Today's Bacing Only																																					
Or	For Today's Racing Only																																					
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