


2010 **Premie Cup** Registration Form
REGATTA • SILENT AUCTION

Kids' Dentist
Stu Bonnin DMD

Joe and Susan
Scarborough



Presented by Kids' Dentist, Stu Bonnin; Joe and Susan Scarborough; & The Fish House
April 17, 2010

Class(*):			
Sail #:		Rating(**)	
Boat / Team Name:			
Skipper:			
Street Address:			
City, State, Zip			
Email:			
Phone:			

(*) The following classes are planned:
 Big Boat Classes: Double-handed (spin or non-spin), Spinnaker, and Non-spin. (PHRF Scoring, \$50 donation)
 Single-handed One-Design Classes: Opti, Laser Full Rig, Laser Radial: \$30 donation
 Open-Portsmouth Classes (dinghy and multi-hull): \$30 donation if single-handed, \$50 donation if skipper and crew.
 (**) Include any modifiers when giving Portsmouth rating.

Decision to Race:
 I understand that I am solely responsible for my yacht and crew. I understand my rights and responsibilities under the *Rules* (including US SAILING Racing Rules of Sailing, Notice of Race, and Sailing Instructions) and applicable Coast Guard regulations. To the fullest extent permitted by law, I hereby waive any rights I may have to sue the race organizers (organizing authority, race committee, protest committee, host club, sponsors, or any other organization or official) involved with the event with respect to personal injury or property damage suffered by myself or my crew as a result of our participation in this event and hereby release the race organizers from any liability for such injury or damage.

Signature: Skipper/Yacht Owner/Parent of Minor _____ **Date** _____

Pre-Registered Boats will receive tickets to the Silent Auction (1 for \$30 entry donation, 2 for \$50 entry donation which are to be picked up at the 'Will Call' table at the event. Boats registering before 09 April 2010 will pick up their goodie-bags and T-shirts at the Skippers' Meeting.

T-shirts w/Entry*:	1 size _____ & 1 size _____ (1 w/\$30 entry, 2 w/\$50 entry, donation)	FREE	- 0 -
Additional Regatta T-shirts (# & size):		@ \$15 each =	\$ _____
Additional Silent Auction Tickets:		@ \$25 each =	\$ _____
Regatta Entry Fee Donation:			\$ _____
Total:			\$ _____

Credit Cards Accepted: _____ **Make Checks out to: Sacred Heart Foundation**

VISA _____	Mastercard _____	Discover _____	AMEX _____
Credit Card #:	_____	Exp Date:	_____ CVVC or CCID: _____
Name on Card:	_____	Transaction Date:	_____
Signature: _____			

Send Registration to: Premie Cup Regatta C/O PBYC, PO Box 1112, Gulf Breeze, FL 32562 - 1112

Office Use Only: Date & Time Received: _____	By: _____
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