EMAIL or fax your completed form to CYC Bookeeper before the first race of the series Kathy Bookeeper (accounting@cycop.com) Fax: 610 521-6037



One Design Registration 2018

Name of Sk	ipper					
Name of Boat		Sail No				
Address	Street					
	City		State	Zip		
	Email		Phone	e		
Member # _		(Members account will be billed as indicated below)				
Please Chec	k Class ar	nd Racing Series you plan t	o race.			
J/22	(\$115]	per series or \$315 for all th	ree)	All	Spring Series	_
					Summer Series I	
V15	(\$105 ₁	per series or \$285 for all th	ree)	All	Summer Series II	
					Total amount \$	_
*(\$25 regist	ration fee	per Wednesday evening ra	cing if no	ot registered	for the series).	
participating entirel committee, protest of damage to any boat participation in club	y at their committee or other postivities	own risk. See RRS#4, Deci e, host club, sponsors, or an property or the injury to any s. By participating, each co	ision to R y other of y competition a	ace. The rarganization tor, including rees to re	njury. Competitors in club ev ce organizers (organizing auth or official) will not be respon ng death, sustained as a result lease the race organizers from the fullest extent permitted by l	hority, race nsible for tof n any and
Signature of Skippe	er			Date		
Name of Crew		, Em	nail			
Name of Crew		, Em	nail			
Name of Crew		, Em	nail			
Name of Crew		, Em	nail			