



55th ANDROS INTERNATIONAL YACHT RACE

JOHN B. GOULANDRIS 2022

ENTRY FORM

<u>Performance Class</u>	
<u>Sport Class</u>	
<u>Double Handed Class</u>	
<u>Sailing Superyachts Class</u>	

BOAT'S NAME:	
SAIL NUMBER:	CLUB:

BOAT'S NATIONALITY DETAILS	
FLAG:	REGISTER:

BOAT and RIG DETAILS	
BUILDER / TYPE:	DATE OF BUILT:
BOAT'S COLOR:	DECK'S COLOR:
COLOR OF THE HULL BOTTOM:	RIG TYPE:
SPINNAKERS' COLORS FROM TOP TO BOTTOM:	
No 1	
No 2	

MEASUREMENT CERTIFICATE DETAILS (Certificate Attached)		
No	ISSUED ON:	ISSUED BY:
RATING:	CLASS:	
VHF		
VHF CALL SIGN	AVAILABLE CHANNELS:	

SKIPPER'S DECLARATION

- 1) I declare that I and my crew, acknowledge that the event is governed by the **WS Racing Rules of Sailing** and the regulations and conditions stated in the Notice of Race and Sailing Instructions of the event, we will participate in the event at our sole risk, in accordance with the fundamental rule 3 of the RRS and we further acknowledge that the organizing Clubs and any committee or other person connected with the event shall have no liability for any accidents or damage to my boat, to persons or things or to third parties, at sea or on land, during the race, as specifically specified in the item "DISCLAIMER" of the Notice of Race.
- 2) I declare that I and my crew accept the use of our personal information as well as any kind of material, by the organizers, in accordance with the item "MEDIA RIGHTS – DATA PROTECTION" of the Notice of Race.
- 3) I further declare that the above mentioned boat is equipped in accordance with the requirements of the World Sailing Offshore Special Regulations for class 3 events as they are stated in the Notice of Race.
- 4) I hereby declare that the boat
HAS individual advertising **DOES NOT HAVE** individual advertising
- 5) I declare that the copies of attached measurement certificates are valid and they have not been changed or revoked for any reason until today.
- 6) I declare that the relevant provisions no 20 and no 23 of the GPR will be respected, as they are amended and in force, that the maritime documents and supplies prescribed for the boat's class are in force and onboard it, as well as that international navigation safety regulations will be applied.
- 7) I declare that I and my crew are aware of and fully comply with the written provisions of the applicable sports law, the approved Health Protocol of the HSF/HOC and we are the owners of all the documents required by the above provisions.**

Date:

Skipper's Signature:

SKIPPER'S NAME:	
CLUB :	ADDRESS :
MOBILE PHONE No :	E-MAIL:

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CREW LIST

BOATS'S NAME & SAIL No:				
		HSF REGISTR. NUMBER	ATHLETE'S CLUB	MEDICAL CERTIFICATE
1	SKIPPER :			
	PERSON IN CHARGE (Mobile contact phone available 24 hours a day during the races)			
	CREW:			
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				

DATE:	SIGNATURE:
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The crew list was received by:

NAME:

POSITION:

PLACE: DATE:

TIME: