



Museum of Yachting
 31st Annual Classic Yacht Regatta
 September 4-5, 2010
 Sponsored by Panerai
 Regatta Management by Sail Newport

Name: _____ Email: _____

Address: _____

City: _____ State: _____ Zip: _____ Phone: _____

Boat Name: _____ Designer & Year of Design: _____

LOA: _____ Boat Type: _____ Hull Color: _____

Sail Number: _____ CRF Rating: _____

Would you like to be considered for the Tom Benson Restoration Award (boats restored within the last 2 years)?

Yes No

Choose Class (Circle One): Classic Spinnaker Classic Non-Spinnaker Spirit of Tradition Spin.
 Spirit of Tradition Non-Spin. Good Old Boats 12 Metre 6 Metre S-Class Shields LaBelle

**Entry Fee: Entry fee includes 2 days of racing and 2 tickets to the Sunday Evening Awards Dinner
 \$250 before 8/27/2010; \$275 until 9/4/2010**

CYR Entry Fee _____ \$250

Additional Sunday Evening Dinner Tickets _____ @ \$50 = _____

Please make checks payable to the Museum of Yachting **Total: \$ _____**

Credit Card Number: _____ Exp: _____ Sec Code: _____

By signing below and registering for this event, I accept the following statement:

The submission of this entry indicates that I voluntarily assume the risk of participation in this event and that I understand that the safety of my boat and that of its crew, and the decision to start or continue any race, are my responsibility and not that of Sail Newport, the International Yacht Restoration School, the Museum of Yachting, their employees, agents, sponsors or, volunteers. In consideration of being permitted to enter this event, I, for myself and my heirs, legal representatives, successors and assigns, hereby waive any and all claims which I may at any time have against Sail Newport, the International Yacht Restoration School, the Museum of Yachting, their employees, sponsors, or, volunteers as provided by R.I. Gen. Laws § 7-6-9, from all liability in connection with any injury or damage that may occur arising out of my participation or the participation of my boat in this event. I certify that I am knowledgeable of the risks of competitive sailing and I agree to abide by the Racing Rules of Sailing 2005-2008 and the specific Classic Yacht prescriptions of the sailing instructions for this event.

Signature: _____ Date: _____ Print Name: _____

There is no charge to attend the Friday and Saturday evening cocktail parties. Please indicate how many people you expect to attend each event. Friday Welcome Cocktail Party: _____ Saturday Cocktail Party: _____

***Please note all CYR social events are cash bar**

Please mail to: IYRS attn: Cristina Marfuggi 449 Thames St. Newport, RI 02840 -or- Fax: 401.842.0669