



30th Annual Museum of Yachting Classic Yacht Regatta
Sponsored by Panerai
September 4-6, 2009
Regatta Management by Sail Newport



Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Boat Name: _____ Designer & Year of Design: _____

LOA: _____ Boat Type: _____ Hull Color: _____

Sail Number: _____ CRF Rating: _____

Choose Class (Circle): **Classic Spinnaker** **Classic Non-Spin** **12 Metre** **Modern Spinnaker**
Modern Non-Spin **LaBelle Class** **Shields** **S-Class** **6 Metre**

Entry Fees: Entry fee is \$250 until 8/28/09; entry fee after 8/28/09 is \$275

CYR Entry (Includes 2 Dinner Tickets): \$250.00 \$250.00

Additional Saturday Night Dinner Tickets: \$55.00 _____ @ \$55=\$_____

Friday Cocktail Party: \$25.00 _____ @ \$25=\$_____

Sunday Awards Cocktail Party: \$25.00 _____ @ \$25=\$_____

Check or Cash Enclosed (Circle One) **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: _____

Printed Name: _____

Please Mail to: IYRS 449 Thames St. Newport, RI 02840 - or - Fax: 401-847-8320