

New South Wales 16ft Skiff Association

SKIFF REGISTRATION FORM

CLUB: _____

DATE: _____

NAME OF SKIFF: _____

COLOUR PATCH/INSIGNIA DESCRIPTION: _____

DIAGRAM OF COLOUR PATCH/INSIGNIA:

(For new registrations the diagram shall be coloured, to scale and dimensioned as far as possible).

HULL NUMBER ALLOCATED: _____

CREW NAMES: 1. _____ (skipper)

(Full name in
BLOCK letters)

2. _____

3. _____

4. _____

5. _____

OWNER: _____

Contact address: _____

_____ Postcode: _____

Phone: _____ **Email:** _____

(Please print clearly)

Crew Email: 1. _____ 2. _____

(Please print clearly)

(Please print clearly)

I acknowledge that the club nominated above is the "home" club of my skiff for the purposes of rule 3.4 of the "Conduct of 16ft Sailing in New South Wales" rules and that the skiff complies with all rules specified in the "Class Rules" of the Australian 16ft Skiff Association.

Signature of Owner: _____