

**NSW 16FT SKIFF ASSOCIATION**

**NSW 16FT SKIFF STATE CHAMPIONSHIPS YOUTH DIVISION**

**ENTRY FORM - 2016/2017 Season**

Name of Skiff.....

Club .....

Skippers Name ..... YA Member # .....

Date of Birth ...../...../.....

Crew Names (1)..... YA Member # .....

Date of Birth ...../...../.....

(2)..... YA Member # .....

Date of Birth ...../...../.....

**Owner/Skipper contact details:**

Name: .....

Address: .....  
.....

Phone No.: .....

Owner/Skipper email .....

I declare that all persons nominated above are, or were, under the age of 25 years as at 1<sup>st</sup> October 2016 and agree that any change of crew (including skipper) for any race during the NSW 16ft Skiff State Championships will be advised to the NSW 16ft Skiff Race Committee at least 1 hour prior to the start of that race and that such advice will include the date of birth for the replacement crew member.

I also acknowledge that, to be eligible to score a place in the Youth Division in any race during the 2016/17 season NSW 16ft Skiff State Championship that all crew members of the skiff participating in that race must have been under the age of 25 years as at 1<sup>st</sup> October 2016.

I also agree that, if requested by the Race Committee, suitable evidence of age for any crew member will be produced to a member of the Race Committee.

Signed: .....

Date: .....

(Owner / Skipper)