

**Registration Form**  
**THE GREAT RACE**  
*Saturday, September 12, 2015*

Name: \_\_\_\_\_ US Sailing ID#: \_\_\_\_\_  
Or  
Street: \_\_\_\_\_ MBSA #: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_  
Yacht Club: \_\_\_\_\_ Vessel Name: \_\_\_\_\_  
Builder: \_\_\_\_\_ LOA: \_\_\_\_\_ Sail Number: \_\_\_\_\_  
2015 PHRF Racing Rating: \_\_\_\_\_ 2015 PHRF Cruising Rating: \_\_\_\_\_

I choose to compete under my:  
Racing Handicap \_\_\_\_\_  
Cruising Handicap \_\_\_\_\_

I hereby certify that the above referenced yacht will be outfitted and equipped in accordance with ORC Category 4 requirements and in accordance with the conditions of the race and that I will comply with all governmental regulations. I assume all responsibility for her seaworthiness and for my competency and that of my crew.

I hereby absolve the Annisquam Yacht Club, Eastern Point Yacht Club, their officers, members, employees, and race committee members from all responsibility or liability for loss of life or injury or for loss or damage to my vessel, equipment or other property.

I agree to be bound by the Racing Rules of Sailing and by all other rules that govern this event.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please return this form along with your check payable to the Annisquam Yacht Club in the amount of \$40.00 (minus \$5.00 for US Sailing members and \$5.00 for MBSA members) to:

Cape Ann Challenge  
Annisquam Yacht Club  
17 River Road  
Gloucester, Massachusetts 01930

**Entry forms must be received at Annisquam Yacht Club no later than Friday, September 11th,  
2015**