



Sailing/Racing Program

2024 Entry Form

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 Pinckney, MI 48169-9430
 734-426-4155
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| | | | | |
|---|-----------------------------|---|-------------------------|-------------------------|
| Race Program Registration (per household) | | | | \$330 |
| Class Associations - Membership strongly encouraged. Benefits include Class integrity. Links below. Unlisted classes are welcome, too. | | | | |
| Interlake | Flying Scot | Laser | MC Scow | Sunfish |
| Thursday Night Sailing | | Silver Series Registration | | |
| Class: | <input type="text"/> | Sail No.: | <input type="text"/> | Skipper: |
| Class: | <input type="text"/> | Sail No.: | <input type="text"/> | Skipper: |
| Novice Sailor | <input type="text"/> | Boat Name: | | <input type="text"/> |
| Open Class | <input type="text"/> | Seniors (\$80): | \$ | |
| | | Juniors (under 21) (\$40): | \$ | |
| | | Late Fee (Renewal after April 25) (\$20): | \$ | |
| Make checks payable to Portage Yacht Club | | TOTAL: | \$ | |
| PLEASE supply email address for race duty notification on Google Calendar and for other info such as pop-up socials, instruction, etc. | | | <input type="text"/> | |
| By submitting their registration, all competitors agree to be bound by the Racing Rules of Sailing and all other rules that govern these events. | | | | |
| For each boat registered in the Silver Series, a representative of that boat must be available for race management assignments for that series. By responding to the questions below, you will make it possible for the Race Committee to attempt to arrange convenient scheduling for your race management duties. Lack of response will be taken to mean that you are willing to be scheduled at any time. Preferences given to early entries!!! | | | | |
| Silver Series – Thursday Evenings | | <input type="text"/> | | |
| Please schedule me for these dates: | | <input type="text"/> | | |
| Please DO NOT schedule me for these dates: | | <input type="text"/> | | |
| Do you know anyone interested in occasionally or regularly serving as a scorer on the Race Management Boat? If so, please provide contact information. "On the job" training will be provided as necessary: | | | | |
| Name: | <input type="text"/> | Contact Information: | <input type="text"/> | |

For Office Use Only

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|---------------------------------------|--|---------------------------------------|---|
| <input type="checkbox"/> QB | <input type="checkbox"/> US Sailing Membership | <input type="checkbox"/> Racers Email | <input type="checkbox"/> Racers List |
| <input type="checkbox"/> RM Scheduler | <input type="checkbox"/> Google Calendar | <input type="checkbox"/> Scorer | <input type="checkbox"/> Fleet Captains |