



**Clontarf Yacht & Boat Club**  
**International Mirror Class Association of Ireland Mirror**  
**Mirror Northern Championships**  
**5<sup>th</sup> - 6<sup>th</sup> May 2018**

**Entry Form**

**Please Note:**

- Entries will be accepted in order of receipt.
- Completed entries must be accompanied by the entry fee of €50

Details Required (Block Caps)	Helm	Crew
Name		
Address		
Email Address		
Mobile Number		
Club		
Date of Birth		
Boat Name		
Sail Number		
Spinnaker Colour		
Fleet (Gold, Silver, Bronze.)*		*See rules on <a href="http://www.imcai.com">www.imcai.com</a>

I agree to be bound by The Racing Rules of Sailing and by all other rules that govern this event. I certify that I am insured for third party risks of €3,000,000 per event or equivalent and that I am a member of the International Mirror Class Association of Ireland and Irish Sailing. I agree to produce, if requested, a valid measurement certificate and IMCAI membership at registration. I have read and understand fully Rule 4 Decision to Race and accept that the organising authority (CY&BC), and any of their members, employees or representatives will not accept any liability for material damage or personal injury or death sustained in conjunction with or prior to, during, or after the regatta. I confirm that the boat entered complies with the International Mirror Class Association of Ireland safety requirements.

Signed: \_\_\_\_\_

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

**Entry fee & other costs to be paid on the day of the first race.**

**N.B. For entrants under 18 years on the date of the first race, this form and the declaration above must be signed by a responsible adult who must be present at the event.** Such adult may not be another competitor unless that adult is also Parent or Guardian of the entrant. This requirement applies for both Helm and Crew. Non-compliance may (at the sole discretion of the IMCAI or CY&BC) result in this entry not being accepted.

Responsible Adult for Helm: \_\_\_\_\_ Responsible Adult for Crew: \_\_\_\_\_

Name: \_\_\_\_\_ Name: \_\_\_\_\_

Mobile Phone No: \_\_\_\_\_ Mobile Phone No: \_\_\_\_\_

Address at Event: \_\_\_\_\_ Address at Event: \_\_\_\_\_

