

**\*\*All Proceeds Benefit the  
American Cancer  
Society**



# 39th Annual Sailing Regatta

**1982** Sponsored by Mount Sinai Sailing Association **2020**

## Saturday, September 26th, 2020

### ENTRY FORM

(registration deadline: 9/19/20)

Owner/ Captain: \_\_\_\_\_

Street Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Yacht Name: \_\_\_\_\_ Sail Number: \_\_\_\_\_

Telephone No. Home &/or Office: \_\_\_\_\_ Email: \_\_\_\_\_

Builder's Designation & LOA: \_\_\_\_\_ Club Affiliation (list one only): \_\_\_\_\_  
For Mather Cup Qualification

Year Built & Type of Rig: \_\_\_\_\_ Spinnaker: Yes \_\_\_\_\_ No \_\_\_\_\_

2020 PHRF Rating (enclose copy of certificate): \_\_\_\_\_ Double-Handed: Spinnaker \_\_\_\_\_ Non-Spinnaker \_\_\_\_\_

Topside Color: \_\_\_\_\_ LWL \_\_\_\_\_ Beam \_\_\_\_\_ Draft \_\_\_\_\_

Displacement \_\_\_\_\_ Keel \_\_\_\_\_ Largest Jib \_\_\_\_\_ % Power: O/B \_\_\_\_\_ I/B \_\_\_\_\_ Prop \_\_\_\_\_

Anything non-standard about boat? \_\_\_\_\_ If yes, give details \_\_\_\_\_

**\*\*Arrangements can be made for moorings or slips. Please contact Jeff Leiman 631.828.5480 as early as possible.**

I hereby agree that the Safety of my Yacht and her crew, and the decision whether or not to start or continue to race, is my own responsibility and not that of any person sponsoring or undertaking such race or activity. I hereby waive all claims, demands, liability, actions, and course of action whatsoever, which I may have against all sponsors, organizers, YRA, and any other related or affiliated company and their respective officers, directors, agents and employees, its member club and organizations, arising out of or related to any loss, damage, or injury including death, in any way connected by my participation in any race related activity sponsored or undertaken by them. I will inform my insurance underwriter of this waiver and inform all crew members of any yacht which I sail in any race or activity of their responsibilities for safety. I agree that this waiver is binding on my heirs, successors and assigns. I also Acknowledge that the Sponsors' and/or organizers may publish photos, video tape and use my likeness in connection with or on the promotion and advertising of sponsor brands or future events. Any photographs taken will be the sponsors' and/or organizer's sole and exclusive property. I the undersigned hereby Acknowledge and request that I have read the foregoing and understand it and sign it voluntarily and I am of sound mind.

**X** \_\_\_\_\_ **Signature Required**

### **"THE PHRF BUSTER TROPHY"**

***So you think your PHRF rating is wrong?***

***Now is your chance to get even!!***

For this special trophy (and only this trophy) you can buy seconds added to your rating @ \$10.00 per second. Buy as many seconds you like. All proceeds will go to the American Cancer Society.

The Rating Buster Trophy shall be scored separately and has no bearing on the overall scoring or any other trophy awarded at this event.

**How many seconds do you want to buy @ \$10.00/second \_\_\_\_\_? Total \$ \_\_\_\_\_**

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

Yacht: \_\_\_\_\_

Sail#: \_\_\_\_\_ Current PHRF Rating: \_\_\_\_\_

RACE ONLY ENTRY FEE: \$50.00 on or before 9/19/20: \$ \_\_\_\_\_

ADDITIONAL CONTRIBUTION: \$ \_\_\_\_\_

PHRF BUSTER SECONDS: \$ \_\_\_\_\_

TOTAL ENCLOSED: \$ \_\_\_\_\_

Please make check payable to the  
AMERICAN CANCER SOCIETY or charge my:

( ) Visa ( ) MasterCard ( ) Amex

Card #: \_\_\_\_\_

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

For Further Racing Details & Return of Entry Form:

Sharon & Jeff Leiman 631.828.5480 or fax 631.474.2267

122 Alden Drive, Port Jefferson, NY 11777

website: www.mssa.org

e-mail: mom11@aol.com