



47th Annual Stephen C. Smith Memorial Regatta April 24 - 26, 2020



GUEST PACKAGE *

*You can register online at www.SmithRegatta.com

(One entry form per person)

Name: _____

Address: _____ City: _____ St.: _____ Zip: _____

Tel. # (____) ____ - _____ E-mail: _____ (Please print legibly)

Club Affiliation: _____

Regatta Shirt Size Request: (# of each size) XXL ____ XL ____ L ____ M ____ S ____ YL ____ YM ____

YL-Youth Large / YM-Youth Medium

This registration includes one regatta shirt, one beverage bracelet **, and entertainment. You may include one Saturday night dinner ticket for \$10 more. Additional t-shirts may be ordered now for \$15 or purchased, if still available, on the beach after the close of registration for \$20 each. Extra dinner tickets may be purchased now or until noon Saturday for \$15 each.

Saturday Night Dinner Choice: (enter number) Chicken ____ Shrimp ____ **No Substitutions Please!**

Without Saturday Night Dinner

OR

With Saturday Night Dinner

Total Extra Shirt _____ **at \$15 ea**

Total Extra Saturday Night Dinners _____ **at \$15 ea**

Donate directly to the Stephen C. Smith Memorial Foundation, Inc. All donations will be given to the American Cancer Society.

Early Registration (on or before 4/18/20)

\$35 \$ _____

OR

\$45 \$ _____

\$ _____

\$ _____

Donation \$ _____

TOTAL \$ _____

Late Registration (after 4/18/20)

\$45 \$ _____

OR

\$55 \$ _____

\$ _____

\$ _____

Donation \$ _____

TOTAL \$ _____

Make checks payable to: *Stephen C. Smith Memorial Regatta Foundation (SCSMR is OK too)*, or use your credit card:

Print Name as it appears on Credit Card: _____ Circle one: Visa / Discover / Mastercard / AmEx

Card Number: _____ Exp. Date: _____ Three numbers on back: ____ _

In consideration of you accepting my entry I hereby agree to all the Conditions of these races which I have read and understood. I hereby warrant that my boat will be outfitted, equipped and handled in accordance with those Conditions, and that it will have all required equipment aboard, that it will be seaworthy in hull, rig and gear and that it will be competently manned. The decision to race is my sole responsibility. In consideration of being permitted to participate in the Stephen C. Smith Memorial Regatta and fully knowledgeable of the risks of sailing, racing and motor boating, I agree to hold harmless the organizers of the Stephen C. Smith Memorial Regatta, the Stephen C. Smith Memorial Regatta Foundation, Inc., the Apalachee Bay Yacht Club, the Shell Point Sailboard Club, the American Cancer Society, the Wakulla County Board of Commissioners, and their officers, members, directors, employees and agents from any and all damages, losses, claim suits, actions, expenses, or liabilities which may arise from my participation in this event.

**** I hereby agree to pickup my beverage bracelet in person. (Your beverage bracelet will not be given to someone else to deliver to you.)**

Signed: _____ Date: _____

Mail completed entry form and check to:

Stephen C. Smith Memorial Regatta, 51 Royster Drive, Crawfordville, FL 32327

For information call: (850) 545-8169 or (850) 212-1336 or visit www.SmithRegatta.com