



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



PHRF FLEET VESSEL ENTRY FORM *

* You can register online at www.SmithRegatta.com

Yacht Name: _____ Sail # _____ (Absolutely Required) Manufacturer: _____
Model: _____ Length: _____ (21 feet & over)
Size of biggest head sail (jib) _____ % roller furling jib? yes _____ no _____ roller furling main? yes _____ no _____
Division: (check one) Multi-Hull: _____ Spinnaker: _____ Non-Spinnaker: _____ Beginner/Cruising: _____
PHRF Rating: _____ (Rating will be provided if not known), Contact Michael Getman for information: (850) 408-9339
Engine type: Inboard _____ Outboard _____ Fixed Prop (# of Blades) _____ Folding or Feathering Prop yes _____ no _____
Skipper: _____ Crew Member: _____
Address: _____ City: _____ St.: _____ Zip: _____
Tel. # (____) ____ - _____ E-mail: _____ (Please print legibly)
Club Membership: _____
Regatta Shirt Sizes Request: (# of each size) XXL ___ XL ___ L ___ M ___ S ___ YL ___ YM ___
YL-Youth Large / YM-Youth Medium

This registration includes: Two regatta shirts, two beverage bracelets (one for skipper and one for first mate)**, two Saturday night dinner tickets, and entertainment. Additional t-shirts may be ordered now for \$15 or purchased on the beach after the close of registration for \$20 each. Extra dinner tickets may be purchased now or on Saturday until noon for \$15 each. Additional Crew: Register as a "Guest" at www.smithregatta.com.

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

Entry Fee:

Early Registration on or Before 4/18/2020 \$80 \$ _____
After 4/18/2020 \$90 \$ _____

Total Extra Shirts (entry fee includes 2 shirts) _____ at \$15 ea \$ _____

Total Extra Saturday Night Dinners (entry fee includes 2 dinners) _____ at \$15 ea \$ _____

Donate directly to the Stephen C. Smith Memorial Foundation, Inc. \$ _____

All donations will be given to the American Cancer Society.

TOTAL ENCLOSED \$ _____

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: _____

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