



Club Marine Geographe Bay Race Week

Sunday 17th to Friday 22nd February 2019

Registration Form

Mail: PO Box 243, Busselton WA 6280
 Fax: 9754 2866
 Email: gbrw2018@gmail.com
 Web: www.gbyc.com.au

TAX INVOICE

***Required fields**

*First Name _____ *Last Name _____

*Name of Yacht _____ Home Yacht Club _____

*Skipper Name _____ *Australian Sailing Card No: _____

*Postal Address _____ *Suburb _____ *Post Code _____

*Email _____ *Contact Phone No during Race Week _____

*Yacht Design / Class _____ *Sail No: _____ National Equipment Audit No: (if app) _____

*Draft (mtrs) _____ *Length (mtrs) _____ *Beam (mtrs) _____ *Keel Type _____

Mobile phone No. to receive SMS messages from the Race Officer, in the event of start time delays etc.

NOTE: 2019 GBRW fees **DO NOT** include mooring or pen fees. These are available separately from Port Geographe Marina and are as advertised at www.portgeographemarina.com.au | Email: craig@pgmarina.com.au

***DIVISION ENTERED**

<u>*2019 GBRW ENTRY FEES</u>			
ALL Divisions	\$ 300	DIV 1 Racing	
*Late Nomination Fee ALL Divisions (payable from 1st Feb '19)	\$ 75	DIV 2 Racing	
*TOTAL AMOUNT DUE	\$	DIV 3 Premier Cruiser	
		DIV 4 Jib and Main	
		DIV 5 Multihull	
		DIV 6 Double Handed	

As the authorised person, I certify that prior to and during the 2019 GBRW Regatta, the registered vessel will have complete ***Boat Insurance of \$10 million and SR Cat 6 Audit** forms, as required by Geographe Bay Race Week (GBRW) and Geographe Bay Yacht Club (GBYC). I have included proof of Insurance with this registrations. I also agree to the terms and conditions as listed in the GBRW Notice of Race and acknowledge that the listed organisations will not be liable for any loss, damage or injury to any property or person that may be incurred by me, my crew, or the registered boat during the 2019 GBRW Regatta. ***Proof of Insurance must be supplied at time of registration, otherwise entry MAY NOT be processed.**

SR Cat 6 Audit form (also a requirement, but may be produced on Registration day if not available at time of entering).

By signing, I agree to the above terms and conditions.

* Signature: _____

* Date: _____

DIRECT DEBIT: BSB: **086-565** Acc No: **742396702** Acc Name: **GBYC** Ref: **Entering Boat Name**

CREDIT CARD:

Type of card: VISA MASTERCARD (We **DO NOT** accept any other Cards)

Card No:

Name on Card: _____ CCV Expiry

CHEQUES: made payable to Geographe Bay Yacht Club.

Please return completed form together with Proof of Insurance and SR Cat 6 Audit forms (if available) to:
gbrw2018@gmail.com | Post: GBYC PO Box 243, Busselton WA 6280 | Fax: 08 9754 2866

PAYMENT OPTIONS