

2017 Lyver Trophy Race

Race Officer in Emergency: +44 (0) 7794183146

YACHT _____ SAIL NO _____ RACE _____ HOME PORT _____

TOTAL LIFERAFT CAPACITY _____ PERSONS _____ LIFERAFT RENTAL COMPANY _____

Liferaft No. 1 MANUFACTURER _____ **Liferaft No. 2** MANUFACTURE _____ **Liferaft No. 3** MANUFACTURE _____

SERIAL NO _____ SERIAL NO _____ SERIAL NO _____

MODEL _____ MODEL _____ MODEL _____

SERVICE STATUS _____ SERVICE STATUS _____ SERVICE STATUS _____

PLEASE COMPLETE IN BLOCK CAPITALS

CREW LIST for your SHORESIDE CONTACT to keep AT HOME (see RORC General Condition 4 (e))

| Full name & address of each crew member. | Full name & address of person to be informed of an emergency or if query arises during the race. | Telephone no. | RORC Member Yes/No | Nationality |
|--|--|---------------|--------------------|-------------|
| | | | | |
| | | | | |
| | | | | |
| | | | | |

YACHT _____

SAIL NUMBER _____

| Full name & address of each crew member. | Full name & address of person to be informed of an emergency or if query arises during the race. | Telephone no. | RORC Member Yes/No | Nationality |
|--|--|---------------|--------------------|-------------|
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

SIGNED..... (Owner/Skipper)

Date