



**Scottish National Mirror Championships 2011  
Lerwick Boating Club - Sat 06 & Sun 07 August 2011  
Entry Form**

**Mirror Dinghy Sail Number:**

**Hull Colour:**

**Skippers Details – Name:**

**Address:**

**Date of Birth:**

**Telephone Number:**

**Sailing Club Affiliation:**

**Declaration:** I agree to be bound by the **Racing Rules of Sailing**. I declare that during the event the boat will hold adequate third party insurance whilst racing.

**Signed:**

**Date:**

**Crews Details - Name:**

**Address:**

**Date of Birth:**

**Telephone Number:**

**Sailing Club Affiliation:**

**Declaration:** I agree to be bound by the **Racing Rules of Sailing**.

**Signed:**

**Date:**

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**Parent or Guardian Declaration**

This declaration is required for each skipper or crew, who is under the age of 16 at the start of this event.

- This skipper or crew is my dependent, and I am responsible for him / her throughout this event.
- I confirm that my dependant is competent to take part.
- I accept the Disclaimer of Liability in the Notice of Race and Sailing Instructions for this event.
- During the time that my dependant is afloat, I will be at the Sailing Club or venue, or can be contacted at very short notice on the emergency telephone number provided below.

**Skippers Parent or Guardian:**

**Name:**

**Address:**

**Emergency Telephone Number:**

**Signed:**

**Date:**

**Crews Parent or Guardian:**

**Name:**

**Address:**

**Emergency Telephone Number:**

**Signed:**

**Date:**