



ENTRY FORM

79th Annual New Year's Frostbite Regatta

SAIL NUMBER _____ BOW NUMBER _____

HULL NUMBER _____ HULL COLOR _____

Boat Name _____

Fleet _____

SKIPPER'S NAME _____

Address _____

City _____ State _____ Zip _____

Phone W (____) _____ Phone H (____) _____

CREW'S NAME _____

Address _____

City _____ State _____ Zip _____

Phone W(____) _____ Phone H (____) _____

ENTRY FEE \$50.00 (non US SAILING member \$65.00) _____

I agree to be bound by the Racing Rules of Sailing and all other rules that govern this event.

Skipper's Signature: _____ Date _____

Please make check payable to **Manhasset Bay Yacht Club**. Mail entry form and check to:

New Years Regatta
Manhasset Bay YC
455 Main Street
Port Washington, NY 11050