



Ghost Lake Sailing Club

Club Racing Boat Registration Form

Personal Information

Skipper's Name: _____

Address: St. _____

Phone No.: _____

City _____

2Nd Phone No.: _____

Postal Code _____

E-mail Address: _____

Boat Information

Boat Name: _____

Boat Length: _____

Sail Number: _____

Keel (Shoal/fin): _____

Make/Model: _____

Rig (tall/regular): _____

PHRF Rating (if known): _____

Motor (circle one): Outboard Inboard Saildrive

Spinnaker (circle one): YES NO

Additional information which may be important when assigning performance handicap rating formula, which may include any changes other than those included with standard manufacturers specifications. This may include but not limited to; oversized sails, modified keel, water ballast, rig modifications.

I attest that the above information is accurate to the best of my knowledge:

Skipper's Name (Print) _____

Skipper's Signature _____

Date _____