



Time Trialling & Check Pointing Registration Form 2022 Season

TIME TRIALLING – SECTION 1

I _____ would like to participate in Time Trialling YES NO

Skipper: _____ Navigator: _____

Boat Name: _____ Racing Number: _____

Please contact the Office if you do not already have a Racing number and we will allocate one to you.

Mobile # _____

Email _____

Please pick a speed you are comfortable driving your boat between 8 and 15 knots.

The speed at which I wish to time trial is: _____ Knots

CHECK POINTING – SECTION 2

I (and/or my guest) would like to assist in Check Pointing YES NO

My (and/or my guest) names are:

The date(s) we are available to checkpoint are:

Please return form by: **5pm Friday 29 April 2022**

Email: reception@claremontyachtclub.org.au