

# ROTARY RECYCLING REGATTA

Sunday 10th November 2024

at the Peter Topham Memorial Swimming Pool, Hinge Road, Harvey



## ENTRY FORM

Craft Name \_\_\_\_\_

Captain's First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Captain's Home Address \_\_\_\_\_

\_\_\_\_\_ Postcode \_\_\_\_\_

Contact Number \_\_\_\_\_ Captain's Email \_\_\_\_\_

Age (if under 18) \_\_\_\_\_

Note : If under 18 years of age, a Consent Form for each person under 18 must be manually completed and submitted with this entry form.

Please tick the category you wish to enter (one per craft)

- |                                            |                                                                    |
|--------------------------------------------|--------------------------------------------------------------------|
| <input type="checkbox"/> 12 years or under | <input type="checkbox"/> Family (2 adults and 2 children under 12) |
| <input type="checkbox"/> 13 - 17 years     | <input type="checkbox"/> Business                                  |
| <input type="checkbox"/> Men 18 or over    | <input type="checkbox"/> Community Group                           |
| <input type="checkbox"/> Women 18 or over  | <input type="checkbox"/> Most Creative                             |

How many will sail on your craft \_\_\_\_\_ Name of crew member 1 \_\_\_\_\_

Name of crew member 2 \_\_\_\_\_ Name of crew member 3 \_\_\_\_\_

### ACCEPTANCE OF RULES

As the Captain of this craft, I declare that my crew and I will abide by the Rules of the Rotary Recycling Regatta.

Signature \_\_\_\_\_

**Entries must be submitted no later than 31st October.**

**ALL PERSONS ENTER INTO AND COMPETE IN THIS REGATTA SOLELY AT THEIR OWN RISK**

CONTACT DETAILS : Co-ordinator Robyn Coleman 0418 95 95 95 robyn@sterob.com