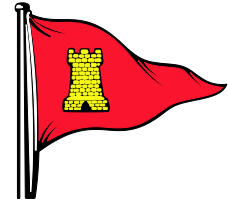




**2019
Round the Island Race**



SAILING/YACHT CLUB TEAM ENTRIES

Island Sailing Club
70 High Street, Cowes, Isle of Wight, PO31 7RE
Email: admin@islandsc.org.uk
Tel: 01983 296621
Fax: 01983 293214

You are invited to enter teams of three yachts for the following trophies.

IRC Class Yachts

- The Methuselah Trophy awarded for the First Overall Team
- The Jeroboam Trophy awarded for the Second Overall Team

ISCRS Class Yachts

- The Arun Yacht Club Team Challenge Trophy awarded for the First Overall Team
- The Jeroboam Trophy awarded for the Second Overall Team

As per Notice of Race 4.7, Sailing or Yacht Clubs that are affiliated to a Member National Authority (e.g. RYA) may enter any number of teams of three individually entered boats for the IRC Class Team Trophy and/or ISCRS Class Team Trophy. Entrants for the Team Trophies must be bona fide members of the entering Club.

Please note you can enter as many teams as you like and the entry fee is £35 per team.

Please return the attached form together with the correct payment to the Island Sailing Club by no later than **12 noon on Wednesday 26 June 2019**.

Thank you.

ROUND THE ISLAND RACE 2019 - SAILING/YACHT CLUB TEAM ENTRIES

ENTRY FEE - £35 PER TEAM

Sailing/Yacht Club (Team Name)	
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IRC CLASS YACHTS

<u>Sail No</u>	<u>Yacht Name</u>		<u>Sail No.</u>	<u>Yacht Name</u>

<u>Sail No</u>	<u>Yacht Name</u>		<u>Sail No.</u>	<u>Yacht Name</u>

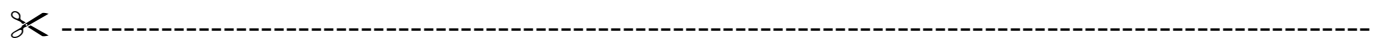
ISCRS CLASS YACHTS

<u>Sail No</u>	<u>Yacht Name</u>		<u>Sail No.</u>	<u>Yacht Name</u>

<u>Sail No</u>	<u>Yacht Name</u>		<u>Sail No.</u>	<u>Yacht Name</u>

YOUR CONTACT DETAILS:

Name	
Contact number	
Email	



You can pay by cheque, debit card or credit card (not American Express) or by calling the ISC office on 01983 296621

I enclose a cheque made payable to Island Sailing Club or Please charge the following card:

The ISC will destroy this section after payment has been taken					
Credit / Debit Card No				Expiry Date	
Last 3 digits from the back		House No. of the billing address			
Postcode of the billing address		Start Date If applicable		Issue No. If applicable	