



**Osprey Class UK National  
Championship**  
3<sup>rd</sup> to 7<sup>th</sup> August, 2019 inclusive

**Entry Form**

**Organising Authority**

**Mounts Bay Sailing Club**

in conjunction with the  
**Osprey Class Association**

Please enter my Osprey for the 2019 Osprey Class UK National Championship.

<u>SAIL NUMBER</u>		<u>BOAT NAME</u>		<u>HULL COLOUR</u>	
--------------------	--	----------------------	--	--------------------	--

I enclose a cheque/PO made payable to "**National Osprey Class Association**". The entry fee, which is not refundable, includes temporary membership of Mounts Bay Sailing Club for the duration of the championships.

(BLOCK CAPITALS PLEASE)

£165 Early Entry Fee (on or before 30 <sup>th</sup> June 2019)		Please send entry to: Kevin Francis 16 Burroughes Avenue Yeovil Somerset BA213JU
£190 Full Entry Fee (after 30 <sup>th</sup> June 2019)		
No entries will be accepted after 31 <sup>st</sup> July 2019		
	<b>HELM</b>	<b>CREW</b>
FORENAMES		
SURNAME		
DATE OF BIRTH		
ADDRESS		
TELEPHONE		
CLUB		

**DECLARATION:**

- I agree to be bound by the *The Racing Rules of Sailing* and all other rules that govern this event. In particular I have read the Disclaimer of Liability in the Notice of Race and confirm that I agree to its provisions and that my boat and crew will conform to its requirements throughout the event. I declare that I will hold, for the duration of the Championship, a valid certificate of insurance including Third Party Liability cover of not less than £2,000,000 (pounds sterling) for any one accident.
- I confirm that each person who will be sailing are capable of swimming a distance of 25 metres in sailing clothing.
- I undertake to sail in compliance with the RYA Racing Charter.
- I have attached a Parental / Guardian Declaration form for each person who will be sailing and is aged under 18 on Wednesday 7<sup>th</sup> August 2019.

Signed \_\_\_\_\_

Date \_\_\_\_\_

Please turnover  
and complete

I am eligible for the following special trophies according to the eligibility rules. Competitors shall declare their eligibility at the registration desk before 10:00 hrs on the day of the 1<sup>st</sup> points race, except for the Last Man Trophy and the Offer Team Trophy.

 **Creeksea Trophy**

1. Awarded to the highest placed boat overall conforming to the Mk II Osprey layout, *i.e.* has an aft deck.

 **U21 Junior Helm Trophy & U21 Crew Trophy**

1. Awarded to the highest placed helm/crew aged under 21 on the 1st day of the National Championships.

 **Filey Novice Trophy**

The following conditions apply to events sailed prior to April 1st in the year of the National Championships.

1. Highest placed helm overall
2. Not placed in top 10 overall in the National Championships of any Class.
3. Not won any Area Championships of any Class.
4. Not placed in the top 5 overall in any Inland Championships of any Class.
5. Not won an Open Meeting in any Class.
6. Not won a race in any National or Inland Championships of any Class.

 **Masters Trophy**

1. Awarded to the highest placed helm aged over 40 on the 1st day of the National Championships.
2. Helm must have attained an overall position in the top 6 at a previous National Osprey Championships.

 **Over 40 Helm - Tubbs Trophy**

1. Awarded to the highest placed helm aged over 40 on the 1st day of the National Championships.
2. Awarded to the highest placed helmsman *not* qualifying for the Masters Trophy.

 **Over 40 Crew - Tenby Tankard Trophy**

1. Awarded to the highest placed crew aged over 40 on the 1st day of the National Championships.

**Lady Helm Trophy & Lady Crew Trophy**

1. Awarded to the highest placed Lady helm/crew.

 **Stubley Trophy**

1. Awarded to the highest placed boat overall meeting the following conditions.
2. Open to all Ospreys with a sail number less than or equal to 75% of the latest registered sail number.
3. A minimum of at least 2 boats for trophy to be presented.

 **Stubbs Potential Trophy**

1. Awarded to the highest placed helm on handicap.
2. Helm must have raced in 3 of the last 4 National Championships.
3. Helm must never have finished in top 10 overall at National Championships.

*Handicap calculation*

*Best 5 Nationals race results divided by 5, rounded to nearest whole number (.5 is rounded down)*

*The number of entries in the current Nationals then adjusts this handicap in the following manner*

*Handicap multiplied by Number entries in current Nationals divided by Average number of entries at previous 4 Nationals.*

*Handicap is finally rounded to nearest whole number, (.5 is rounded down)*

 **Forsyth Lang 100 Up Trophy**

1. Awarded to highest placed boat helm and crew with a combined age of 100 years plus on the 1st day of the National Championships.

**Last Man Trophy**

1. Awarded to lowest placed boat overall which has completed each points race.

**Offer Team Trophy**

1. Team to consist of 3 boats.
2. All helms to be from same club, if that club has 3 or more helms entered in the National Championships.
3. The trophy will be awarded to the Team with the lowest points total calculated using the Overall finish positions of the 3 boats. In the event of a tie, the Team with the lowest overall points total will be awarded the trophy. If a tie still exists, "Most 1st's procedure" will be used.

<b>Boat Details</b>	
Builder and Year built	
Hull & deck material	
Spar manufacturer & material	
Boom manufacturer & material	
Centreboard manufacturer & construction materials	
Rudder blade / rudder stock <i>etc.</i> manufacturer & construction materials	
Sailmaker – main, genoa & spinnaker	

## Voluntary Medical Declarations and Emergency Contact Details

Event            Osprey National Championships 2019  
 Location        Mounts Bay Sailing Club  
 Event Date     3<sup>rd</sup> to 7<sup>th</sup> August 2019

**Voluntary Medical Information** for your safety, in the event of an accident. This information will be retained for the duration of this event only.

### HELM

Any Medical conditions:

.....  
 .....  
 .....  
 .....

Emergency Contact Name: .....

Telephone: .....

Address:

.....  
 .....

I agree that the above information may be shared with the host club and the emergency services in the event of an emergency during this event solely to assist in any medical treatment. Please circle your choice.    YES / NO

### CREW

Any Medical conditions:

.....  
 .....  
 .....  
 .....

Emergency Contact Name: .....

Telephone: .....

Address:

.....  
 .....

I agree that the above information may be shared with the host club and the emergency services in the event of an emergency during this event solely to assist in any medical treatment. Please circle your choice.    YES / NO