

EBYRA Wednesday Night Race Series

----- May 15th to September 18th, 2002 -----

Hosted by:
City Island Yacht Club, Harlem Yacht Club, Morris Yacht & Beach Club, Stuyvesant Yacht Club
and the
Eastchester Bay Yacht Racing Association

Now Better Than Ever!

- For All PHRF Spinnaker and Non-Spinnaker boats
- Use of government buoys and EBYRA marks
- Races to be held in Eastchester Bay near City Island
- 19-Race Series With Throwouts

For More Information:

Ellen Murphy Francine Alheid
718-885-3246 201-343-1435

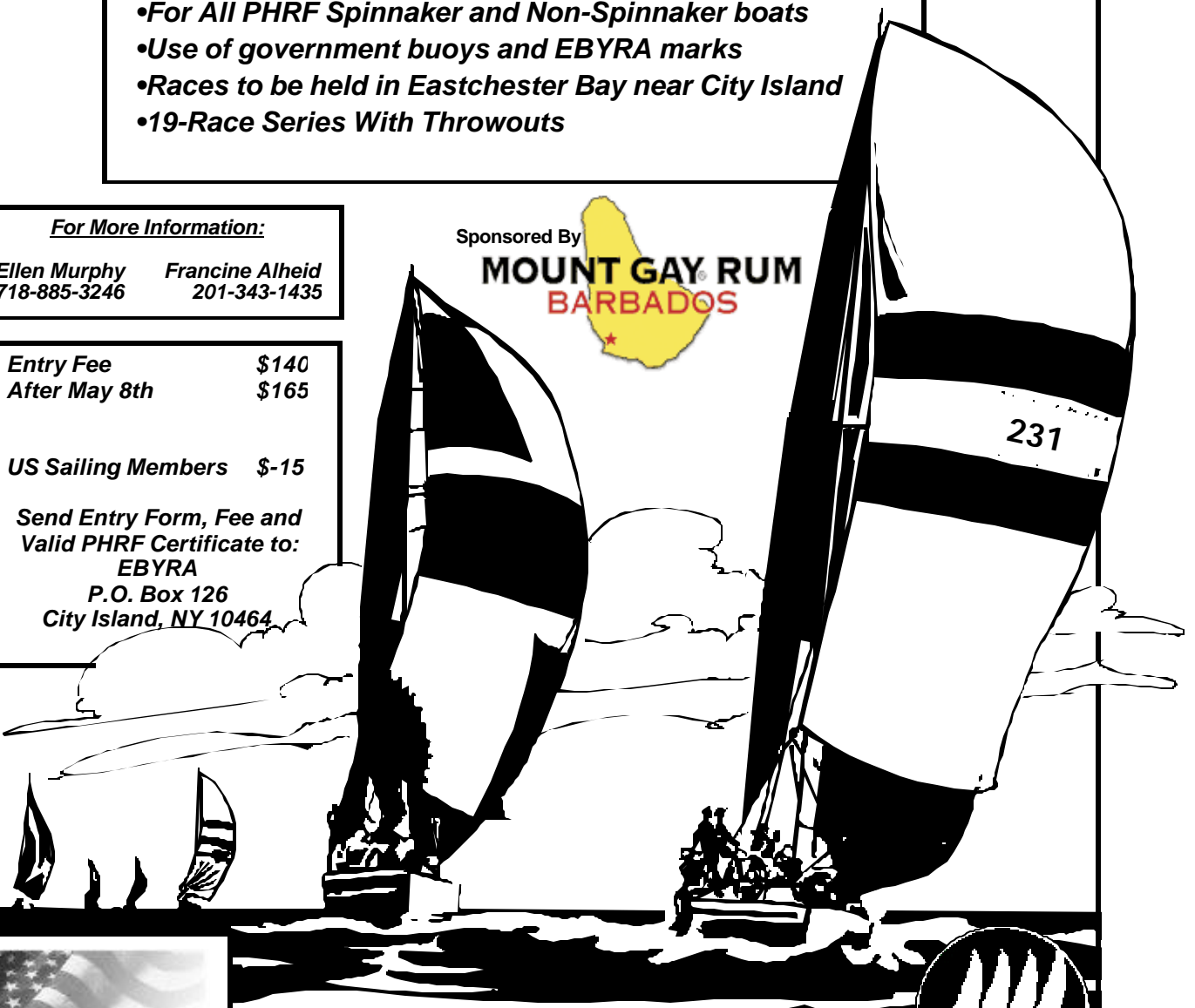
Entry Fee \$140
After May 8th \$165

US Sailing Members \$-15

Send Entry Form, Fee and
Valid PHRF Certificate to:
EBYRA
P.O. Box 126
City Island, NY 10464

Sponsored By

MOUNT GAY RUM
BARBADOS



September 11, 2001

UNITED WE SAIL

FOR NOTICE OF RACE & NEWS:

www.ebyra.org



Wednesday Nights 2002

Entry Form for PHRF-Class Yachts



**FOR RACE COMMITTEE
USE ONLY**

D _____
R _____
NS _____
\$ _____

SAIL NO.*	YACHT NAME	TYPE OR CLASS	LOA	YEAR
OWNER	ADDRESS		DAY PHONE	
CITY	STATE	ZIP CODE	EVE PHONE	
SKIPPER (IF OTHER THAN OWNER)		CLUB AFFILIATION	E-MAIL ADDRESS	

Has this yacht previously registered for EBYRA regattas? Yes No

PHRF Rating assigned by YRALIS _____ (Please attach copy of 2002 certificate. A yacht without a valid 2002 PHRF rating (last year's is not valid) will be assigned one by the race committee for \$10.00)

Circle One: SPINNAKER NON-SPINNAKER

* EBYRA may assign sail numbers to boats to avoid conflicts with boats formerly and currently registered.

Please note three dates you are available for Race Committee duty: _____

Disclaimer of Liability (Signature Required)

In consideration of this entry acceptance, I hereby agree that the safety of my yacht and her crew, and the decision to race or not to continue the race, is my responsibility and not that of any person sponsoring or undertaking such race or activity. I agree to be bound by the Racing Rules of Sailing and by all other rules that govern this event. I hereby waive all claims which I may have against YRA, its member clubs and organizations and their respective officers, directors, members, committees, employees or agents, arising out of or in any way connected with my participation in any race or related activity sponsored or undertaken by any of them, I will inform my insurance underwriter of this waiver and inform all crew members of any yacht which I sail in any such race of activity of their responsibilities for safety. I agree that this waiver is binding on my heirs, representatives, successors and assigns.

Signature: _____ Date: _____

Entry Fee: \$140.00
After 5/9: \$165.00
PHRF Cert. +\$10.00
US Sailing: - \$15.00

Mail To:
EBYRA, P.O. Box 126, City Island, NY 10464

TOTAL: _____
Make Checks Payable to "EBYRA"