New South Wales 16ft Skiff Association



13FT SKIFF REGISTRATION FORM

2017-18 SEASON

CLUB:			DATE: _	
NAME OF SKIFF:				
SAIL NUMBER: _				
CREW NAMES: (Full name in BLOCK letters)	1 Date of Birth:			(skipper)
	2Date of Birth:			-
OWNER:				_
			Postcode	e:
Phone:		Email:	(Please print clear	ly)
Crew Email: 1			_	
2			_	
Rules" of the Austi	ff and its rigging and ralian 13ft Skiff Ass	ociation and		

Signature of Owner: