

APPENDIX 2

INTERSCHOLASTIC SAILING ASSOCIATION
RECORD OF PARTICIPATION FORM

REGATTA _____ HOST _____ DATE ___/___/___

School: _____ Team Rep. Sig. _____			
“A” Division (For a team race event, complete the information below and use the “B” Division for overflow)			
Full Name	Grade	Races Sailed as Skipper	Races Sailed as Crew
SAILOR(S)			

“B” Division ((For a team race event, use the space below for extra sailors)			
Full Name	Grade	Races Sailed as Skipper	Races Sailed as Crew
SAILOR(S)			

ENLARGE AS NECESSARY

Statement of Compliance: By signing above, I certify that the above is a true and accurate record of participation, that the competitors named above are eligible under ISSA eligibility requirements, and that they complied - to the best of my knowledge - with RRS Rule 2. (See PR 4.2 (b) for requirements and penalties)