Appendix 1

ENTRY FORM

DF65 EUROPEAN CHAMPIONSHIPS 2027

10th to 14rd May 2027

Page 1 - Details to be Completed by Each Competitor

Surname	
Forename(s)	
Postal Address	
Postal Code	
Country	
Phone Number (to also be used for WhatApp)	
E-Mail Address	

Details of Boat			
Sail Number		**Boat Name (if any)**	
Country Letters		**Boat Registration Number**	

As a Competitor, I am aware of the rules on Entry & Eligibility for this event and agree to abide by those rules and those within the RRS. I am: (Tick boxes to confirm)	
A National or Resident of the Nation and NCA through which I am Entering	
it is a condition of entry that you are personally covered for Public Liability insurance to the value of £2m at the time of the event. By ticking this box I confirm that I have suitable insurance to meet this requirement	

All those entering or taking part in this Championship do so at their own risk and responsibility. The Organizing Authority and any other parties involved in the organisation of this event disclaim any and every responsibility whatsoever for loss, damage, injury or inconvenience that might occur to persons and equipment before, after or at the event, both ashore and on the water as a consequence of entering or participating in this Championship. At all times the responsibility for the safety of their boat and themselves including the decision to participate or continue racing shall rest with the competitor.

By signing this form I agree to be bound by the Racing Rules of Sailing and by all other rules that govern the event.

I also hereby agree to honour the *DF Classes Founders' Statement* and the *DF Classes Community Online Code of Conduct*, both of which may be found at https://dfracing.world/ica-documents/

Competitors Signature:	

This form and the Entry Fee to be sent to the Organising Authority using the details contained in the Notice of Race .