# Signing On Sheet

**Date:**

**Event:**

Each boat / helm / crew combination should be entered separately
**All water activities are undertaken at your own risk**
**Buoyancy Aids must be worn whilst on the water**

| | Designated | Signature |
|---|---|---|
| Officer of the Day (O.O.D.) | | |
| Race Assistant 1 | | |
| Race Assistant 2 | | |
| Safety Boat 1 - Cox | | |
| Safety Boat 1 - Crew | | |
| Safety Boat 2 - Cox | | |
| Safety Boat 2 - Crew | | |
| Galley Duty | | |

| Forename & Surname Helm & Crew | Class | Sail No. | Fleet | 1st Race | 2nd Race | 3rd Race | 4th Race |
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