

NAME OF EVENT CLASS

DATE OF EVENT LOCALITY

NAME OF BOAT SBA REG No.

SBA REG. EXPIRY DATE **CONTACT PHONE No.**

NAME OF OWNER/S CLUB

ADDRESS OF OWNER/S

NAME OF DRIVER CLUB

SBA DRIVERS LICENCE No. EXPIRY DATE

APBA LICENCE No. APBA RACE No.

CLASS OF BOAT: (HYDRO, TUNNEL, DISPLACEMENT, MONO, etc.)

MOTOR MAKE AND MODEL CAPACITY (cc's)

IN METRES - LENGTH OF BOATm. BEAMm.

DECLARATION BY OWNER(S). To the State Council Secretary, APBA. I/We
 being the owner(s) of the abovementioned boat do hereby certify that the specifications of the boats' hull and motor/s are known to me/us to be in conformity with the Rules and restrictions governing the class of the event entered. I/We will comply with the APBA RACING and SAFETY RULES in their entirety. I/We will not take any legal action of any description against any party concerned with running the of the event. I/We declare that the above particulars are to my/our knowledge true and correct.

Enclosed is an entry/post entry/bond fee of \$..... by cash/cheque/money order made out in favour of the Honorary Secretary of the State Council concerned.

SIGNATURE OF OWNER(S): **DATE:**

WITNESS TO SIGNATURE(S): **DATE:**

ADDRESS OF WITNESS:

DECLARATION BY OWNER(S) CLUB. I, being an Executive Officer of Club, hereby declare that the abovementioned boat is on the current register of this Club and the Owner(s) is/are Full Member/s of this Club and is/are to represent the Club in this event. This Club shall take no legal action of any description against any party or parties concerned with the running of this event.

SIGNED: **PRINT NAME:**

RANK: **DATE:**

DECLARATION BY DRIVER(S). I/We, the undersigned, understand that the race entered is dangerous and acknowledge and accept entirely at my/our own risk, injury or damage to person or property which may be sustained or incurred as a result of or arising out of my/our participation in the said race or event and declare that if applicable I/we use at my/our own risk, a protective cockpit structure (reinforced cockpit), Deflection Bar(s), Restraining Belt(s), etc.

SIGNATURE OF DRIVER(s)

WITNESS TO SIGNATURE (s) **DATE:**

ADDRESS OF WITNESS

FOR OFFICE USE ONLY:

Received by Hon. Secretary Council. Date

Signed: Entry Bond / Post Entry Fee \$..... PAID / TO PAY.