

NAME OF EVENT:	DVBC Winter Spectacular 2024	CLASS:	Albert Corn & Griffith Boat Club for 6 Ltrs <small>Cross out GBC if not eligible for Griffith Boat Club Trophy</small>
DATE OF EVENT:	8th & 9h June 2024	VENUE:	Dargle, Lower Portland NSW
NAME OF BOAT:		RACE No ON BOAT:	
State Boating Authority REGISTRATION NO:		SBA REGISTRATION EXPIRY DATE:	
NAME OF OWNER:		OWNERS CLUB:	
ADDRESS OF OWNER:			
APBA LICENCE NO:		CONTACT NUMBER:	
CLASS OF BOAT:		CAPACITY of MOTOR:	
BOAT LENGTH (Metres):		Annual Inspection Sticker No;	
DRIVER			
NAME OF DRIVER:		DRIVERS CLUB:	
State Boating Authority LICENCE NO:		SBA LICENCE EXPIRY DATE:	
APBA LICENCE NO:		CONTACT NUMBER:	
ADDRESS OF DRIVER:			
DECLARATION BY OWNER(S): To the _____ 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 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 declare that the above particulars are to my/our knowledge true and correct.			
SIGNATURE OF OWNER(S):		DATE:	
DECLARATION BY DRIVER: 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. I/We further declare that if applicable I/we use at my/our own risk, a Reinforced Cockpit, Deflection Bar(s) or Restraining Belt(s), etc.			
SIGNATURE OF DRIVER:		DATE:	
DECLARATION BY PARENT/GUARDIAN: 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 child's participation in the said race or event. I/We further declare that if applicable I/we use at my/our own risk, a Reinforced Cockpit, Deflection Bar(s) or Restraining Belt(s), etc.			
SIGNATURE OF PARENT or GUARDIAN:		DATE:	
Emergency Contact Name:		Mobile	

OFFICIAL USE ONLY					
Received by _____ Council, Australian Power Boat Association					
SIGNED:				DATE:	
Entry Bond:	\$ _____	PAID <input type="checkbox"/>	Late Entry Fee:	\$ _____	PAID <input type="checkbox"/>
		TO PAY <input type="checkbox"/>			
Current Club Memberships Sighted:	YES <input type="checkbox"/>	NO <input type="checkbox"/>			