

<b>NAME OF EVENT:</b>		<b>CLASS:</b>	
<b>DATE OF EVENT:</b>		<b>VENUE:</b>	
<b>NAME OF BOAT:</b>		<b>RACE No ON BOAT:</b>	
<b>State Boating Authority REGISTRATION NO:</b>		<b>SBA REGISTRATION EXPIRY DATE:</b>	
<b>NAME OF OWNER:</b>		<b>OWNERS CLUB:</b>	
<b>ADDRESS OF OWNER:</b>			
<b>APBA LICENCE NO:</b>		<b>CONTACT NUMBER:</b>	
<b>CLASS OF BOAT:</b>		<b>CAPACITY of MOTOR:</b>	
<b>BOAT LENGTH (Metres):</b>		<b>BOAT BEAM (Meters):</b>	

**DRIVER 1**

<b>NAME OF DRIVER:</b>		<b>DRIVERS CLUB:</b>	
<b>State Boating Authority LICENCE NO:</b>		<b>SBA LICENCE EXPIRY DATE:</b>	
<b>APBA LICENCE NO:</b>		<b>CONTACT NUMBER:</b>	

**DRIVER 2**

<b>NAME OF DRIVER:</b>		<b>DRIVERS CLUB:</b>	
<b>State Boating Authority LICENCE NO:</b>		<b>SBA LICENCE EXPIRY DATE:</b>	
<b>APBA LICENCE NO:</b>		<b>CONTACT NUMBER:</b>	

**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.

<b>SIGNATURE OF OWNER(S):</b>		<b>DATE:</b>	
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**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.

<b>SIGNATURE OF PARENT or GUARDIAN:</b>		<b>DATE:</b>	
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**OFFICIAL USE ONLY**

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