

Halifax River Yacht Club

RATING APPEAL of _____ (Name of Yacht Under Appeal)					
Owner of above yacht:			Class/Length:		
Current Valid Rating:			Suggested Rating:		
All the following sections will be filled out by the person appealing the rating of the yacht above, even if you are appealing another yacht's rating. Include all information pertaining to <u>your</u> yacht.					
Appellant's Name:					
Street:		City:		State:	Zip:
Home Phone:			Office Phone:		
Class/Length of appellant's yacht:					
Date of last haul out:			Type of bottom paint:		
How often is bottom cleaned?			How is bottom paint applied?		
Sail Inventory	Sailmaker	Material	Oz.	Condition	Age (mos.)
Mainsail					
Genoa, LP%					
Genoa, LP%					
Genoa, LP%					
Spinnaker #1					
Spinnaker #2					
Others (list)					
CREW:	How many years of racing experience for skipper?				
	How many normally in your crew including skipper?				
	How many crew members sail with you more than 50% of the time?				
TYPES of RACES SAILED	Informal	Specialty Races	Commodores Cup	National/Int's Events	
No. Sailed Annually					

RACE RESULTS: List race results for at least five races.

Date	Race Name	Class Division	Number starters	Corrected Fin. Pos.	+/- sec/mi. to be 1st in class	+/- sec/mi. to be 3rd in class	Club Sponsor

RACE FINISH POSITION	What percentage of time do you finish in top third?
	What percentage of time do you finish in middle third?
	What percentage of time do you finish in bottom third?

COMPETITION: List those boats you feel sail with you on a boat to boat basis.

Class/Length	Yacht Name	Owner	Current Rating	Suggested Rating

COMPETITION: List those boats whose ratings you consider unfair, and what rating you recommend as being fair. (Optional)

Class/Length	Yacht Name	Owner	Current Rating	Suggested Rating

Please attach any additional comments that you feel will help your appeal. Use additional sheets as necessary. Provide any additional documents to support your case. Please sign and date this form and return to the Ratings Committee. The appeal will be reviewed at the next regular meeting.

Appellant's Signature:	Date:
------------------------	-------

DETERMINATION (for Race Committee use only)

Committee Chairman Signature:	Date:
-------------------------------	-------