



Team Details - Marconi Cup Sunday 27th July 2025

(Please complete, sign and bring to the event, to be handed in at Registration and parental consent forms. Alternatively, send via email to **Dee Griffiths** at baltimoresailingclubcourses@gmail.com)

Attending Club:

Team Name:	
Team Members	
RELAY TEAM:	
Helm	Crew
Helm	Crew
Helm	Crew
TEAM RACING:	
Helm	Crew
Helm	Crew
Helm	Crew
Substitutes:	

Name of Responsible Adult accompanying Team: _____

I declare that I understand the qualifying requirements for all sailors participating in this event as communicated in the Notice of Race, Sailing Instructions and amendments thereto, and that all team members fully comply with these.

Signature of responsible adult: _____