

CFJ CLASS

Nationals Regatta Measurement Form

Date: _____

Sail #: _____

Hull #: _____
 (Copy clearly the number from the right hand corner on the transom)

CF # _____

Weight (lbs) DOB (Mo/Day/yr)

Skipper: _____

Crew: _____

Combined crew weight (min 240/max carry 25 lbs) _____ + _____ lbs
 lbs

CFJ Class Member (one person must be a member) Skipper _____ Crew _____

BOAT MEASUREMENT

Boat Weight (min 260 lbs)	_____ lbs	+ _____ lbs
	Yes	No
Pass Nationals Measurement		
Measurement Certificate on File		
New measurement _____ 20__		
SAIL MEASUREMENT & EQUIPMENT	Pass	Fail
Main Sail		
Jib		
Spinnaker		
Mast Step		
Comments/Corrections to be made:		
Measurer's Signature: _____		
Regatta Check-in Registration Fee: _____		BOW #:

Return to Regatta Check-in Desk to complete Registration

Forward to CFJ Class Secretary upon completion of Regatta