**CREW FORM SYDNEY FLYING SQUADRON**

**SKIFF: Australia**

**DATE:** **Sailing Australia Insurance Which Club?**

**(Yes/No)**

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| **(Skipper)** |  |  |
| **(Nominated Officer)** |  |  |
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Signature of Nominated Officer\*:……………………………………..

\*Nominated Officer must advise the Club Captain if any crew member/s do not return to the SFS after a race.

**Return to SFS Club Captain (via tray in Boatshed) at end of the sailing day.**