



First Coast Sailing Association PHRF Rating Questionnaire

www.sailjax.com

BaseRating _____ AdjRating _____

Adj'mts _____

N-SpAdj _____ N-SpRating _____

Handicapper _____

Dues _____

Sail #: _____ Boat Name: _____

Year Built: _____ Boat Mfg/Make: _____

Year Designed: _____ Nominal Length (ft) _____ Hull #: _____ Hull Color: _____

Displacement (lbs): _____ Ballast (lbs): _____ Modifications: _____

Fill in all measurements in feet to 3 decimals (example: 8 ft - 7.25 inches should be written 8.625)

FYI: (1"=0.083, 2"=0.167, 3"=0.250, 4"=0.333, 5"=0.417, 6"=0.500, 7"=0.583, 8"=0.667, 9"=0.750, 10"=0.833, 11"=0.917)

LOA: _____ J: _____ Fore-triangle Base Length LP Jib Max (% of J): _____

LWL: _____ I: _____ Fore-triangle Jib Height ISP: _____ Fore-triangle Spin Height

Draft: _____ P: _____ Mainsail Luff Length SPL or JSP: _____ Spin Pole Length

Beam: _____ E: _____ Mainsail Foot Length WPL: _____ Whisker Pole Length

Keel Type: _____ (Fin, 3/4, Full, Wing, Bulb, CenterBoard, DaggerBoard, Swing, Other)

Aux Motor: _____ (OB, IB-Feathering, IB-Folding, IB-Fixed 2-blade, IB-Fixed 3-blade, Other)

Y/N _____ Cruising Roller Furling Headsail (with sun-cover and above-deck drum) Y/N _____ Roller Stowing Main (in-mast or in-boom)

Spinnaker (Sym, Asym, Both, None): _____ Spin Notes? _____

First Last Name: _____ Hm/Nite Ph: _____

Mailing Address: _____ Bus/Day Ph: _____

City, State, Zip: _____ Cell Ph: _____

e-mail: _____

Yacht Club Memberships: _____

WAIVER: I certify that the listed boat is seaworthy and meets all other requirements of the FCSA Regulations, US Sailing, and all other regulations relating to the races that I enter, and that the information and measurements I have provided here are true and correct. In consideration of receiving a PHRF rating, and for myself, my heirs, and assigns: (1) I confirm that in assigning this boat a handicap rating, FCSA makes no representations or warranties that the boat is designed, maintained, equipped, crewed, rigged, or operated in a safe and seaworthy manner, and waive any claim thereto; (2) I confirm that FCSA has not assumed any obligation to assure that the boat, equipment, or maintenance meets the above requirements, and hereby hold harmless FCSA, its officers, handicappers, employees, or agents from any liability or responsibility resulting from the design, equipment, or use of the boat by me or by others.

\$35, payable to FCSA
Vicki Cross
c/o Rogers, Towers, PA
1301 Riverplace Blvd, #1500
Jacksonville, FL 32207-9020

Signature

Date