

# DRAYCOTE WATER SAILING CLUB

## WATER EVENTS BOOKING FORM 2009

**TO BE SUBMITTED TO THE SECRETARY AT LEAST 1 MONTH BEFORE EVENT**

ORGANISING BODY \_\_\_\_\_

NAME OF ORGANISER \_\_\_\_\_

DETAILS OF EVENT \_\_\_\_\_

DATE OF EVENT \_\_\_\_\_

NUMBER OF BOATS EXPECTED \_\_\_\_\_

TIME OF START OF EVENT \_\_\_\_\_

APPROX FINISH OF EVENT \_\_\_\_\_

### FACILITIES REQUIRED

			DAY 1	DAY 2	DAY 3
NUMBER OF COMMITTEE BOATS			<input type="text"/>	<input type="text"/>	<input type="text"/>
NUMBER OF DORYS			<input type="text"/>	<input type="text"/>	<input type="text"/>
CATERING	GENERAL	(yes/no)	<input type="text"/>	<input type="text"/>	<input type="text"/>
	BREAKFAST	(yes/no)	<input type="text"/>	<input type="text"/>	<input type="text"/>
	EVENING MEALS	(yes/no)	<input type="text"/>	<input type="text"/>	<input type="text"/>
LOUNGE	EVENING FUNCTION	(YES/NO)	<input type="text"/>	<input type="text"/>	<input type="text"/>
EQUIPMENT (BUOYS etc)			_____		
			_____		
			_____		

SIGNED: \_\_\_\_\_  
Organiser of event

DATE: \_\_\_\_\_

BOOKING ACCEPTED: \_\_\_\_\_  
Rear Commodore (Sail)

DATE: \_\_\_\_\_