RACE NAME: ……..……

START TIME: ……..……..

RACE OFFICERS - OOD (print name)

……..……..……..……

.

Safety boat COX: ……..……..……

RACE DATE: ……

WIND DIRECT'N & SPEED: ……

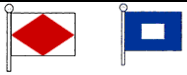
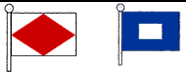
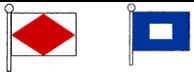
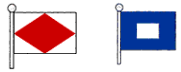
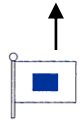
Results Recorder – Please remember to add race% points to each race officer's points record. (Revised March 2015)

Safety boat CREW:

……..……..

COURSE, describe &/or sketch:

HELM	BOAT			CUMULATIVE ELAPSED LAP TIMES (min:sec)						Fin. Ord.	Elapsed race time (secs) (D)	Average lap time (secs) [D/H (A)]	Corrected time (secs) [A/Num laps]	Corr Place
	CLASS	SAIL NO.	PN (H)	1	2	3	4	5	6					
				:	:	:	:	:	:					
				:	:	:	:	:	:					
				:	:	:	:	:	:					
				:	:	:	:	:	:					
				:	:	:	:	:	:					
				:	:	:	:	:	:					
				:	:	:	:	:	:					
				:	:	:	:	:	:					
				:	:	:	:	:	:					
				:	:	:	:	:	:					
				:	:	:	:	:	:					
				:	:	:	:	:	:					

	6 mins	5mins	4 mins	3 mins	2 min	1 mins	0 mins (start)	Shorten Course & Finish
Flags up						1 blast	1 blast	Finish boat 1 blast
Flags down	1 blast	1 blast	1 blast					 Shorten course – 2 blasts when first boat 100 metres from the line
Time								

PTO for Safety Boat checks