

***** Lake Lanier Performance Handicap Racing Fleet ***
Rating Application**

Name: _____ Sailing Club: _____

Address: _____
(Street) (City) (State) (Zip)

Phone Numbers: _____ E-Mail: _____
(Home) (Work)

Boat Class/Type: _____ Boat Name: _____ Sail #: _____

Hull Number: _____ Year: _____ Mfg/Builder: _____

MEASUREMENT DATA

Please provide COMPLETE information. The Committee will use this information to determine the appropriate rating. When in doubt, the FASTEST assumption will be made.

HULL

Length Overall (LOA): _____ Waterline Length (LWL): _____ Beam: _____

Draft: _____ Displacement: _____ Ballast: _____

Keel: Fin [] Shoal [] Wing [] Centerboard [] Swing [] Daggerboard []

Auxiliary Power: Outboard []
Inboard [] (Folding Prop [] or Fixed Prop: 2 blade [] or 3 blade [])

Modifications to Hull from Standard Design. Please Describe Fully:

SAILS AND RIG

Max Headsail: _____% (LP as a % of J) I: _____ J: _____ P: _____ E: _____

Rig Type: Fractional: [] Masthead: [] Tall Mast: [] ODR: []

Spinnaker: Standard: [] Oversize: [] Asymmetrical: [] None: []

Standard Spinnaker. Maximum Girth = 180% of J, Luff = .95 * square root (I squared + J squared)

Spinnaker/Sprit Pole Length (SPL): _____ Spinnaker Luff: _____

Spinnaker Maximum Girth (SMG): _____ Spinnaker Halyard Height (ISP): _____

Modifications to Rig or Sails from Standard Design – Please describe fully:

I certify that the above data is accurate and correct to the best of my knowledge, I will allow the Chief Measurer or his representative to make actual measurements if deemed necessary by the LLPHRF board. If any of the above measurements should change, I will notify LLPHRF in writing as soon as possible. I understand that failure to do so may invalidate this rating.

Signature: _____ Date: _____

[] New [] Renewal Previous Certificate Number: _____

- [] Issue a certificate for current year - \$8.00 enclosed
[] Issue a certificate for current year plus one year - \$12.00 enclosed
[] Issue a certificate for current year plus two years - \$15.00 enclosed

**Note: Multiple year certificates will be replaced at no charge if changes are declared that alter the rating.

Send completed form and check payable to :

LLPHRF
PO Box 904
Flowery Branch, GA 30542

*To report a problem with your rating: Contact your club representative or Len Kirkham at 770.932.6474. or email at <mailto:kirkhaml@usa.net>