



Rock Creek Racing Association

2025 Membership Application

_____ Boat Owner/Skipper \$150

_____ Associate Member \$25

Name: _____ Boat Affiliation: _____

Address: Street _____ Apt: _____

City, State, zip: _____ E-Mail Address: _____

Home Phone: _____ Work: _____ Cell: _____

U.S. Sailing Member: _____ RCRA - US Sailing #153293W CBYRA Member #: _____

Check: ☐ Cash: ☐ PayPal Via RCRA Website: ☐

<http://www.rockcreekracing.org/>

I wish to be included in RCRA Member Text List: ☐

Intended for time critical communications such as RACE CANCELLED DUE TO SEVERE WEATHER.

I wish to be included in RCRA Email List: ☐

Boat Information

Yacht Make: _____ Model: _____ Year: _____

Boat Name: _____ Sail Number: _____

PHRF Ratings: _____ ORR-EZ Rating in effect: Y _____ N _____

If an ORR rating is not obtained RCRA will assign a ORA-1 for Wednesday evening races.

I plan on entering the
following Wednesday evening
race series

| | | | | | | | | | |
|----------|------|--|----------|--|----------|------|--|----------|--|
| Series 1 | Spin | | Non Spin | | Series 2 | Spin | | Non Spin | |
| Series 3 | Spin | | Non Spin | | Series 4 | Spin | | Non Spin | |

I agree that as a full member my boat will be assigned a turn at Race Committee. This will consist of selecting course, setting start and finish lines and noting all participating boats and their finish times. Finish times are to be transmitted to Race Committee chairman promptly at conclusion of race.

I agree to abide by the rules, regulations and sailing instructions set by Rock Creek Racing Association hereafter known as RCRA. In consideration of being permitted to enter these races, being knowledgeable of the risks of competitive sailing and knowing that it is my sole responsibility to decide whether to enter or to continue in any race, I voluntarily assume the risk of participation in these races and release the RCRA, the people planning and the people conducting the event (collectively, RCRA) from any and all liability, including liability from their own negligence, in connection therewith including any injury or damage that may occur. Further, I agree and covenant that I will not sue or bring or assert any action, claim, or cause of action against RCRA.

Signature: _____ Date: _____

Return to: RCRA c/o David Copley, 1306 Water Oak Drive, Pasadena, MD 21122 or fax (call first) 410 255 9081