

WEST FLORIDA PHRF  
 227 BAYSIDE DRIVE  
 CLEARWATER, FLORIDA 33767  
 FAX AND PHONE  
 727-462-0450

## RATING APPEAL

APPELLANT'S NAME \_\_\_\_\_  
 ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_  
 CITY, ST., ZIP \_\_\_\_\_

BOAT NAME \_\_\_\_\_ SAIL NUMBER \_\_\_\_\_

OWNER/MASTER \_\_\_\_\_ CLASS/TYPE \_\_\_\_\_  
 ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_  
 CITY, STATE, ZIP \_\_\_\_\_

CLUB \_\_\_\_\_ RATING: CURRENT \_\_\_\_\_ PROPOSED \_\_\_\_\_

STATE REASON FOR APPEAL \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

FILL OUT THE FOLLOWING SECTIONS FOR YOUR BOAT. IF YOU ARE APPEALING ANOTHER BOAT'S RATING COMPLETE AS MUCH INFORMATION AS POSSIBLE.

HOW HAS BOAT BEEN PREPARED FOR RACING? (i.e. CONDITION OF RUNNING AND STANDING RIGGING, HULL PREPARATION, DECK LAYOUT, INTERIOR , ETC.) \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

LAST HAUL-OUT DATE \_\_\_\_\_ TYPE OF BOTTOM PAINT \_\_\_\_\_

APPLIED BY: BRUSH  ROLLER  SPRAY  HOW OFTEN IS BOTTOM PAINTED? \_\_\_\_\_

HOW IS BOTTOM CLEANED? \_\_\_\_\_ HOW OFTEN? \_\_\_\_\_

IS BOAT DRY SAILED?  WHAT MODIFICATIONS HAVE BEEN MADE TO THE BOAT? \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

SAIL INVENTORY	SAILMAKER	MATERIAL	OZ'S	CONDITION	AGE
MAIN	_____	_____	_____	_____	_____
GENOA LP% _____	_____	_____	_____	_____	_____
GENOA LP% _____	_____	_____	_____	_____	_____
LP% _____	_____	_____	_____	_____	_____
LP% _____	_____	_____	_____	_____	_____
SPINNAKERS 1 _____	_____	_____	_____	_____	_____
2 _____	_____	_____	_____	_____	_____
OTHER (LIST) _____	_____	_____	_____	_____	_____

RACE RESULTS: LIST RESULTS FOR AT LEAST 10 REGATTAS. IF YOUR RACING IS ONLY CLUB RACES, INCLUDE DETAILS OF EACH RACES CONDITIONS, AND ANY OTHER INFORMATION PERTINENT TO YOUR FINISHES.

<u>DATE</u>	<u>REGATTA</u>	<u>CLASS/DIV</u>	<u># OF STARTERS</u>	<u>Cor. Finish Pos.</u>	<u>÷/-sec/mi To Be 1<sup>st</sup> In Class</u>	<u>÷/-sec/mi To Be 3<sup>rd</sup> In Class</u>	<u>Club Sponsor</u>
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____

RACE FINISH POSITION:

WHAT % OF RACES DO YOU FINISH IN THE TOP THIRD? \_\_\_\_\_  
 WHAT % OF RACES DO YOU FINISH IN THE MIDDLE THIRD? \_\_\_\_\_  
 WHAT % OF RACES DO YOU FINISH IN THE BOTTOM THIRD? \_\_\_\_\_

LIST BOATS THAT SAIL WITH YOU ON A BOAT FOR BOAT BASIS

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

LIST BOATS THAT BEAT YOU ON CORRECTED TIME, THAT YOU SHOULD BE SAILING EQUAL TO OR BEATING ON CORRECTED TIME \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_

ADDITIONAL COMMENTS THAT SUPPORT YOUR APPEAL. ALSO INCLUDE ANY PRINTED INFORMATION AND RACE RESULTS. \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

APPELLANT'S SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

**SIGN AND RETURN THIS FORM TO: WEST FLORIDA PHRF, 227 BAYSIDE DRIVE, CLEARWATER, FLORIDA 33767. IF YOU NEED HELP FILLING OUT THIS FORM OR HAVE ANY QUESTIONS, PLEASE CALL 727-462-0450.**