

# PHRF OF E.L.I.

THE PERFORMANCE HANDICAP RACING FLEET OF EASTERN LONG ISLAND

## 2015 RATING CERTIFICATE

THIS CERTIFICATE EXPIRES ON APRIL 30, 2016 OR UPON A CHANGE OF OWNERSHIP, WHICHEVER OCCURS FIRST.

FOR HANDICAPPER USE ONLY

CLASS

RATINGS




SPIN

NON-SPIN

TCF



OWNER

STND CLASS

BASE




IF O.D.

YACHT NAME	MFG DATE	HULL #	SAIL #

MAKE / MODEL	DESIGNER

OWNER OR MASTER

MAILING ADDRESS

CITY	STATE	ZIP

PHONE	E-MAIL ADDRESS

I UNDERSTAND THAT IT IS MY RESPONSIBILITY TO NOTIFY THE HANDICAPPER OF CHANGES TO THIS YACHT WHICH WOULD AFFECT MEASUREMENT POINTS, HANDICAP ADJUSTMENTS OR WOULD ALTER HER FROM A STANDARD BOAT.

SA/D	D/L	B/L	JC	C	M/G	G/JS

ADJUSTMENTS	FACTOR	SEC/MILE
BASE LP		
JAD		
JCF		

SPIN		
------	--	--

NON-SPIN		
----------	--	--

ROLLER FURLING		
----------------	--	--

PROP		
------	--	--

MIN HP		
MISC		

OWNER SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

SIGNATURE OF HANDICAPPER \_\_\_\_\_ DATE \_\_\_\_\_

### YACHT MEASUREMENT DATA

IF METRIC

LOA	DISPL	I	ISP
LWL	BALLAST	J	
BEAM	MATERIAL	P	PY
DRAFT		E	EY

<b>LARGEST JIB</b>	
%	
OR LP	
WPL	

<b>SYMMETRIC SPINNAKER</b>	
G	
MSL	
SPL	

<b>ASYMMETRICAL SPINNAKER</b>	
ALU	BSPL
ASF	ALE
	AMG
ASYM FLOWN FROM SPRIT OR POLE (Y/N)	

<b>KEEL</b>	
<input type="checkbox"/>	FULL
<input type="checkbox"/>	FIN
<input type="checkbox"/>	WING
<input type="checkbox"/>	CENTERBOARD
<input type="checkbox"/>	OTHER

<b>RIG TYPE</b>	
<input type="checkbox"/>	MASTHEAD
<input type="checkbox"/>	FRACTIONAL
<input type="checkbox"/>	OTHER
<input type="checkbox"/>	DACRON W/ FURLING JIB

<b>RUDDER</b>	
<input type="checkbox"/>	ATTACHED
<input type="checkbox"/>	SKEG
<input type="checkbox"/>	SPADE
<input type="checkbox"/>	TRANSOM

**MODIFICATIONS**

HAVE HULL, RIG OR APPENDAGES EVER BEEN MODIFIED OR INTERIOR ACCOMMODATIONS REMOVED? IF SO, PLEASE EXPLAIN.

<b>ENGINE</b>	
<input type="checkbox"/>	INBOARD
<input type="checkbox"/>	OUTBOARD
<input type="checkbox"/>	OUTBOARD H.P.
<input type="checkbox"/>	NONE ABOARD

<b>PROP INSTALL</b>	
<input type="checkbox"/>	APERTURE
<input type="checkbox"/>	EXP SHAFT
<input type="checkbox"/>	SAILDRIVE

<b>PROP TYPE</b>	
<input type="checkbox"/>	FOLD/FEATH
<input type="checkbox"/>	SOLID
<input type="checkbox"/>	NO. BLADES