



**Application form for the participation in the
'FLEET 25' 2024 -2ND EDITION**

To: Organising Authority

E-mail: platu25gre@gmail.com

I would like to be invited in the FLEET 25 2024 -2ND EDITION

and I accept the terms and provisions of the Notice of Race.

(Please return till November 24th)

| | |
|---------------------|--|
| TEAM NAME | |
| SKIPPER Name | |
| SKIPPER Family Name | |
| ISAF SAILOR ID | |
| MOBILE | |
| EMAIL | |

CREW

| <i>A/A</i> | <i>NAME</i> | <i>FAMILY NAME</i> |
|------------|-------------|--------------------|
| <i>1</i> | | |
| <i>2</i> | | |
| <i>3</i> | | |
| <i>4</i> | | |
| <i>5</i> | | |

Date:/2024

Signature: