

2015 USRowing Central Youth Championships

SCRATCH FORM

Organization Name:	
Contact Name:	
Day Phone:	Evening Phone:
Cell Phone:	Fax:
Email:	
Event Name:	Event #:
Date of Race:	
Boat Designation (A boat, B boat, etc...):	Entry # _____ Of _____ entries
Reason?	

Signed _____ Date submitted _____