



Fleet Charter Application Form

(Minimum of 4 boats required for fleet)

Fleet Captain Name _____

Address _____

City _____ State _____ Zip Code _____

Telephone _____ Email _____

I do hereby apply for registration of the _____ fleet
(Name of Fleet)

Area Fleet Serves _____
(lake, body of water, port or other description)

Name

Email

Hull Number

1. _____

2. _____

3. _____

4. _____

5. _____

6. _____

7. _____

8. _____

9. _____

10. _____

Members of the _____ fleet agree to abide by the Class Rules of the J/70 Class Association.

Fleet Captain Signature _____

Class Association Use Only	Assigned Fleet #
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