

Creefleet Registration Form

First Name: _____

Last Name: _____

Boat Type: _____

Boat Sail Number (or identification): _____

Email: _____

Phone Number (Optional): _____

Experience Level: _____

Crew name(s) (optional): _____

Comments: _____

Please return this completed form to a Creefleet member
or email information to: mameyer@yahoo.com

