# PACIFIC HANDICAP RACING FLEET OF THE N. W.

## CHANGE FORM

**PRESENT DATA:** (CHECK AGAINST ROSTER)

| SAIL NUMBER | BOAT NAME | RATING | CODE | BOAT DESCRP. | Y.C. | OWNER'S NAME |
|---|---|---|---|---|---|---|
| | | | | | | |

**CHANGE TO:**

| SAIL NUMBER | BOAT NAME | RATING | CODE | BOAT DESCRP. | Y.C. | OWNER'S NAME |
|---|---|---|---|---|---|---|
| | | | | | | |

NOTES

**ROUTE COPIES TO:**

HANDICAPPER
CENTRAL FILE
MEMBER

HANDICAPPER _____ DATE _____