

# BAMA RATING APPEAL FORM

Return completed appeal form to [racechair@sfbama.org](mailto:racechair@sfbama.org)

Yacht Under Appeal \_\_\_\_\_ Current rating \_\_\_\_\_  
 Proposed rating \_\_\_\_\_  
 Sail Number \_\_\_\_\_

Owner: \_\_\_\_\_  
 Appellant's Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Phone Number: \_\_\_\_\_ Email / Fax: \_\_\_\_\_

Fill out all the following sections for your yacht even if you are appealing another yacht's rating.

Date of Last Haul-Out: \_\_\_\_\_ Type of bottom paint: \_\_\_\_\_  
 How is bottom paint applied: \_\_\_\_\_ How often is bottom cleaned: \_\_\_\_\_

## Sail Inventory

	Describe (Loft):	Material	Condition	Age (months)
Main				
Jib LP %				
Jib LP %				
Jib LP %				
Spinnaker 1				
Spinnaker 2				
Screacher 1				
Screacher 2				
Others (list)				

## Crew:

How many years of racing experience for skipper: \_\_\_\_\_  
 How many normally in your crew including skipper: \_\_\_\_\_  
 How many crew members sail with you more than 50% of time: \_\_\_\_\_

## Races:

List number and type of races sailed annually, such as Sunday Brunch, Jack Frost, YRA sanctioned races, ...

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

## Race Results:

List race result data for the appealed yacht and your own in at least five (5) races

Date	Club - Sponsor	Race Name	Class/Div	Number of Starters	Finish Position Corrected	+/- seconds to be 1 <sup>st</sup> in Class	+/- seconds to be 3 <sup>rd</sup> in Class

What percentage of the time do you finish in top third: \_\_\_\_\_  
 What percentage of time do you finish in middle third: \_\_\_\_\_  
 What percentage of time do you finish in bottom third: \_\_\_\_\_

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## Competition

Class - LOA	Yacht Name	Sail Number	Owner	Current Rating	Suggested Rating

List those boats you feel sail with you on a boat-for-boat basis:

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List those boats that best you on corrected time which you feel you should be beating or sailing equal to on corrected time:

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List those boats whose rating you consider unfair, and what rating you recommend as being fair. (optional):

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Please make any additional comments that you feel will help your appeal. (Attach additional sheets if necessary.)

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Please sign and return this form to BAMA – Race Chairman

C. Harvey  
1161 Pleasant Hill Circle  
Lafayette, CA 94549  
racechair@sfbama.org

Date \_\_\_\_\_  
Appellant's Signature \_\_\_\_\_