



## Questionnaire regarding Offshore Powerboat Racing

### My Contacts

Name: \_\_\_\_\_  
Country: \_\_\_\_\_  
Phone: \_\_\_\_\_  
e-mail: \_\_\_\_\_

### I have:

	<i>Name</i>	<i>Class/Size</i>	<i>Year</i>
Boat make:	_____	_____	_____
Engine make:	_____	_____	_____
Raced in class:	_____	_____	_____

*If you have more than one boat, please Copy & Paste this section.*

### I would like to participate in the following type of Venues during the Season

Typical long distance from A to B: ☐  
Open Sea returning to start area: ☐  
Multiple laps in Open Sea: ☐  
Multiple laps in city harbours: ☐

### I would like to compete in the following Region/s

Scandinavian: ☐  
UK: ☐  
Mid-Europe: ☐  
Mediterranean: ☐  
All over Europe: ☐

### I would like to participate in the following type of Event

One day: ☐  
Friday - Saturday: ☐  
Weekends: ☐  
Mini Series over a week with lay-days: ☐

*Tick all the boxes that meet your needs*

Thank you for filling in this form. Please return this form within June 10<sup>th</sup> 2014, to [simonfromnorway@gmail.com](mailto:simonfromnorway@gmail.com) and help us find the right path for European Offshore Racing in the future.