

# SAILING RESUME FOR RACING COURSES & EVENTS

A separate form must be filled out for everyone in your party. Please print, do not use script.  
 Email this completed form to [Info@OffshoreSailing.com](mailto:Info@OffshoreSailing.com)

Crews sailing together in a racing course or event are most compatible when everyone aboard has similar racing goals and sailing and racing experience. For that reason, we ask you to candidly answer each of the questions in this questionnaire.

First \_\_\_\_\_ Middle \_\_\_\_\_ Last Name \_\_\_\_\_  
 Nickname \_\_\_\_\_ Email Address \_\_\_\_\_  
 Cell Phone \_\_\_\_\_ Home or Work Phone \_\_\_\_\_

Each boat is assigned four crew members. Please list other participants you wish to crew with, understanding that this will be honored **only** if the same request is made in writing by each of the other parties listed here:

(1) \_\_\_\_\_ (2) \_\_\_\_\_ (3) \_\_\_\_\_

1. **DO YOU HAVE ANY OF THESE SAILING SCHOOL CERTIFICATIONS?** US Sailing (USSA)  
American Sailing Association (ASA) RYA (Royal Yachting Association) Canadian Yachting Association (CYA, now Sail Canada)

2. **If YES**, please check any of the courses below that you took from Offshore Sailing School (O)SS) or another sailing school and indicate the year and size boat you learned on. The course numbers apply to OSS courses, but may be similar to other organizations

Course Name	USSA	ASA	RYA	CYA	Year Earned	Size Boat
<input type="checkbox"/> Basic Keelboat 101	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/> Performance Sailing 102	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/> Basic Cruising 103	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/> Bareboat Cruising 104	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/> Coastal Navigation 105	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/> Coastal Passage Making 106	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/> Celestial Navigation 107	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/> Offshore Passage Making 108	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/> Performance Race Week 109	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/> Power Cruising on Powerboat 112	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/> Catamaran Endorsement 114	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/> Other: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____

3. **WHAT IS YOUR SEX:** Male Female

If it can be arranged, would you prefer to sail in a coed crew all male crew all female crew

4. **PLEASE INDICATE YOUR AGE:** 14-17 18-25 26-35 36-45 46-55 56-65 Over 65

5. **PLEASE INDICATE YOUR WEIGHT:** Under 100 100-115 116-125 126-140 141-160 161-180  
181-200 201-250 Over 250

6. **WHICH POSITION(S) ARE YOU MOST COMFORTABLE DOING ON A SAILBOAT?**

Check all that apply. Captain Skippering Navigating Steering Crewing Passenger

7. **HOW MANY YEARS HAVE YOU RACED SAILBOATS?** 10+ 6-9 3-5 1-2 Never raced

8. **HOW MANY TIMES DID YOU RACE EACH YEAR IN THE PAST 2 YEARS?** Every weekend during racing season 20+ times 10-19 times 6-9 times Less than 6 times None

9. **WHAT TYPE OF RACING HAVE YOU DONE THE MOST IN THE PAST TWO YEARS?**

Round the buoy Weekend overnights Long distance Mix of round-the-buoy and overnights



**10. WHICH TYPE AND SIZE BOAT(S) DID YOU RACE ON MOST IN THE PAST TWO YEARS? Check all that apply.**

- Dinghy (14' or under)
- Small catamaran like Hobie Cat
- One design keelboat, PHRF or other  under 20'  20-25'  26-30'
- Monohull yacht  under 30'  31-35'  36-45'  46-59'  50' or over
- Catamaran yacht  under 30'  31-35'  36-45'  46-59'  50' or over

**11. DURING THE PAST TWO YEARS, WHICH ROLES HAVE YOU DONE THE MOST? Check all that apply.**

- Driver
- Tactician
- Foredeck crew, with spinnaker (symmetric)
- Foredeck crew with jennaker (asymmetric)
- Foredeck crew, no spinnaker/jennakers
- Midships/mainsheet trimmer
- Jib trimmer
- Navigator
- Cook
- Ballast/passenger

**12. IF "DRIVER" – HOW MANY STARTS DID YOU DO EACH YEAR IN THE PAST TWO YEARS?**

- Every weekend during racing season
- 20+ times
- 10-19 times
- 6-9 times
- Less than 6 times
- None, one of my crew did the starts

**13. IF YOU SAIL ON BOATS WITH SPINNAKERS, INDICATE WHICH TYPE OF SPINNAKER YOU FLY THE MOST AND WHICH ACTIONS YOU ARE MOST COMFORTABLE DOING? Check all that apply.**

- Symmetrical
- Asymmetrical
- Setting
- Jibing
- Windward douse
- Leeward douse

**14. WHERE HAVE YOU RACED THE MOST IN THE LAST TWO YEARS? Check all that apply.**

- Great Lakes
- Small Inland Lake
- River
- East Coast in Sounds/Bays
- East Coast in Atlantic
- Gulf of Mexico in Sounds/Bays
- Gulf of Mexico in the Gulf
- West Coast in Sounds/Bay
- West Coast in Pacific
- New England Coast
- Coast of Maine
- Northwest coast
- Canadian Coast
- Europe waters
- Japan, China or Far East waters
- Other, please write in: \_\_\_\_\_

**15. WHICH OF THESE SKILLS ARE YOU MOST COMFORTABLE DOING ABOARD? Check all that apply.**

- Steering/helming
- On all points of sail and
- In heavy seas and strong winds
- Using a GPS to plot a course and
- Reading and using nautical charts to plot your course
- Docking a boat alongside in varied wind conditions and directions as helmsperson
- Anchoring a boat as helmsperson
- In windy conditions
- In crowded harbors
- Knowing when and how to reef the main and reduce sail area
- As helmsperson
- As crew
- Maneuvering under power as helmsperson
- In windy conditions
- In crowded harbors
- Assisting as crew, handling and cleating lines
- Docking alongside or bow/stern in
- Anchoring
- Understanding and using the Rules of the Road (Col Regs) to avoid potential collisions with sailboats under sail, sailboats under power, power boats and commercial vessels in channels and open waters, vessels under tow and other situations

**16. RANK WHAT IS MOST IMPORTANT TO YOU ABOUT TAKING A RACING COURSE (1 least important, 5 most important):**

- |  |                            |                            |                            |                            |                            |
|--|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|
| To win races as skipper when I get back home | <input type="checkbox"/> 5 | <input type="checkbox"/> 4 | <input type="checkbox"/> 3 | <input type="checkbox"/> 2 | <input type="checkbox"/> 1 |
| To win races as crew when I get back home    | <input type="checkbox"/> 5 | <input type="checkbox"/> 4 | <input type="checkbox"/> 3 | <input type="checkbox"/> 2 | <input type="checkbox"/> 1 |
| To learn how to race more competitively      | <input type="checkbox"/> 5 | <input type="checkbox"/> 4 | <input type="checkbox"/> 3 | <input type="checkbox"/> 2 | <input type="checkbox"/> 1 |
| Just to learn how to race                    | <input type="checkbox"/> 5 | <input type="checkbox"/> 4 | <input type="checkbox"/> 3 | <input type="checkbox"/> 2 | <input type="checkbox"/> 1 |
| To generally improve my sailing skills       | <input type="checkbox"/> 5 | <input type="checkbox"/> 4 | <input type="checkbox"/> 3 | <input type="checkbox"/> 2 | <input type="checkbox"/> 1 |
| To have fun on a sailing vacation            | <input type="checkbox"/> 5 | <input type="checkbox"/> 4 | <input type="checkbox"/> 3 | <input type="checkbox"/> 2 | <input type="checkbox"/> 1 |

**17. WHAT TYPE OF CREW DO YOU LIKE TO RACE WITH MOST?**

- Highly competitive
- Moderately competitive
- Easy going, not competitive



**18. PLEASE ANSWER THE FOLLOWING GENERAL SAILING AND RACING QUESTIONS:**

- A. Which of these knots are you comfortable tying: bowline clove hitch stopper knot
- B. When sailing upwind are your sails Closehauled Luffing All the way out?
- C. Which of these are the five points of sail: Downwind Aft of abaft Closehauled Upwind Close reach Tight reach A run Beam reach Broad reach
- D. If the leeward jib telltale is fluttering, do you Trim the sail or Ease the sail?
- E. A wind shift towards the bow is called a Header Lift Tack?
- F. When your boat is hit by a puff of wind, does the apparent wind go Forward or Aft?
- G. Is a starting sequence Five minutes or Ten minutes?
- H. Is the "Zone" around the mark Two boat lengths or Three boat lengths?
- I. Are those boat lengths measured by The largest boat entering the zone or The boat nearest the mark?
- J. When you enter a harbor in U.S. waters should the green buoy be to your Right or Left?
- K. If your course heading is 225° are you sailing North Northeast West Northwest South Southwest East Southeast?
- L. Does the apparent wind change with the boat's speed and direction? Yes No
- M. Have you calculated a Course to Steer (CTS) and Estimated Position (EP)? Yes No

**19. PLEASE TELL US ABOUT YOUR HEALTH AND PHYSICAL CAPABILITIES?**

- A. Do you have any physical problems that would make it difficult for you to  move around the boat,  steer,  pull on lines,  communicate easily? **If you checked any of these boxes, please explain:**  
\_\_\_\_\_  
\_\_\_\_\_
- B. Are you currently going through treatment for an illness or have you had any major impairments such as  a stroke,  heart attack, or  an injury that limits your flexibility, strength and ability to move about the boat with ease?  No  Yes **If Yes please explain:** \_\_\_\_\_  
\_\_\_\_\_
- C. Are you fully-vaccinated against COVID-19? YES NO

**20. OTHER INFORMATION NEEDED:**

**UNISEX POLO OR TEE SHIRT SIZE:** XS S M L XL XXL XXXL  
**WOMENS POLO OR TEE SHIRT SIZE:** 4 6 8 10 12 14 16 18

**ARRIVAL AND DEPARTURE INFORMATION:**

Arrival date \_\_\_\_\_ Time \_\_\_\_\_ AM PM Airline/Flight# \_\_\_\_\_  
Departure date \_\_\_\_\_ Time \_\_\_\_\_ AM PM Airline/Flight # \_\_\_\_\_

If you are driving to the course location, please check this box  and include your arrival and departure information requested above.

**SHORE ACCOMMODATIONS:**

If you have access to other accommodations (a vacation home, friends nearby) and are not purchasing that portion of the package, please tell us where you will be staying: \_\_\_\_\_

**EMERGENCY CONTACT INFORMATION:**

Name \_\_\_\_\_ Cell Number \_\_\_\_\_

