

GULF HARBOUR LAUNCH CHARTERS

RESUME OF BOATING EXPERIENCE

We want you to enjoy your holiday afloat. A sound knowledge of boating and safety at sea is essential when taking a vessel for your boating holiday.

NAME OF HIRER:
ADDRESS:
.....
CONTACT NUMBERS: Res: Mobile:.....
E mail:.....
NAME OF SKIPPER: AGE:
Mobile:.....

SKIPPER'S EXPERIENCE:

Have you skippered a similar sized vessel to Sian? Yes No
Size/type of vessel.....

Have you bareboat chartered before? If so please complete below
Date: Size / type of Vessel:
Charter Co: Boating Area:

Other Boating Experience:
.....
.....
.....
.....

Marine Courses & Qualifications held.
.....
.....
.....

Please circle or highlight as appropriate:

Anchoring Experience:	Limited	Good	Extensive
Chart Reading (Paper Charts)	Limited	Good	Extensive
Course Setting(Paper Charts)	Limited	Good	Extensive
VHF Radio operation	Limited	Good	Extensive

I understand the collision avoidance rules, the NZ Buoyage system, the Water Recreation Regulations, how to read a chart and plot a course.

I certify that the above declaration of my experience and knowledge of boating is correct and that I have sufficient competence to safely operate this vessel.

DECLARATION: I certify that this information is correct and it is my understanding, that if the owner /operator is not fully satisfied at the time of the charter that I am capable of skippering the vessel, a skipper or crew may be place on board the vessel at my expense or alternately the charter will be terminated. No refund applies.

Skippers Signature:Date:

The following section can be completed at the time of the charter if not finalized at the time of booking the charter

CREW:

Names of all persons on board except the Skipper:

- 1. 2.
- 3. 4.
- 5. 6.
- 7.

Brief description of crew experience if any:

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.

EMERGENCY CONTACT DETAILS: An adult or family member not on this charter

Name: Tel:

RETURN TO: gulfharbourcharters@gmail.com
Any queries, please contact Paul Marra 021 942 221