



BOAT REGISTRATION FORM

Date:

NAME OF VESSEL:

SAIL NO (if applicable):

TYC REGISTRATION NO. :

MAST Reg. No. :

OWNER/S NAME/S (in full):

.....

ADDRESS:

.....

CONTACT NUMBERS: HOME WORK

..... MOBILE FAX

EMAIL:

NAME & PHONE NUMBER OF ALTERNATIVE CONTACT PERSON:

.....

PREVIOUS OWNERS.....

YACHT/MOTORBOAT/MULTIHULL/OTHER (give details)

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IF A YACHT - STATE TYPE: RACING OR CRUISING:

DESIGN: CRUISER/RACER:

AGE APPROX: RIG:

LENGTH OVERALL: metres BEAM: metres

DRAUGHT: metres DISPLACEMENT (TONNES):

CRUISING SPEED UNDER POWER:

COLOUR OF TOPSIDES: DECK: BOTTOM:

HULL CONSTRUCTION: (Wood/Steel/Alloy/Fibreglass/Concrete):

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USUAL MOORING/STORAGE ARRANGEMENT:

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SAFETY EQUIPMENT:

This vessel complies with Marine and Safety Tasmania's safety equipment requirements for
(Please tick one)

Smooth Waters

Sheltered Waters

Coastal waters

Please refer to the General Safety section of the Mast website www.mast.tas.gov.au for details of the minimum safety equipment list for your vessel operating in the areas you select.

Please tick activity or activities you are most likely to join in or enter with your vessel
(Please tick one or more)

- Down River Inshore Racing
- Ocean Racing
- Motor Trials
- Cruising in Company
- Navigation Trials
- Club / Marina social activities
- Other

SIGNED:

OWNER(S):

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