



BOAT STORAGE APPLICATION

Season 2016 – 17

BOAT DETAILS

Class		Sail Number (or)	
Boat Name		Ensign Description	
		Rack Preference	Bottom __ Middle __ Top __

BOAT OWNERS DETAILS (MUST BE OVER 18 YEARS OF AGE)

	OWNER 1	OWNER 2
First Name		
Last Name		
Date of Birth		
Address		
Suburb & Postcode		
Phone (home)		
Phone (mobile)		
E-mail		
B16ftSC Membership Number		
Yachting Australia Membership Number		

Completion of this form does not guarantee a storage position, please refer to the Club's "Boatshed Storage Policy" (available on www.sail16s.com.au and in the Sailing Handbook) before completing this form.

PARTICIPATION

Racing	I intend to sail my boat during the 2016-17 sailing season at the following events: <input type="checkbox"/> 75% Club Races <input type="checkbox"/> State & National Championships
Club Activities	I intend to support Sailing Activities in the following capacity <input type="checkbox"/> Club Director <input type="checkbox"/> Class Captain/Vice Captain <input type="checkbox"/> Race Management crew <input type="checkbox"/> Support Boat Driver/Crew <input type="checkbox"/> Shore Marshall/Radio Officer <input type="checkbox"/>

DATED: this day of in the year

Boat Owner 1 Signature	Boat Owner 2 Signature
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