GARDEN ISLAND YACHT CLUB INC.

Postal address: PO Box 1531, Port Adelaide SA 5015

Email: secretary@gardenislandyc.com

APPLICATION FOR BOAT APPROVAL

Please complete this form and return to the Secretary

PLEASE PRINT CLEARLY

First name: …… Last name: ……

Home phone: …… Mobile Phone: ……..

Email address: ……

Boat details

Boat name: …… Make / model: ……

HIN number: …… Registration number: ……

Insurance Company: …… Policy number: ……

Policy expiry date: ……..

Boat type: □ **sail** □ mono full keel □ mono med. keel □ mono fin keel

□ trailer sailer □ catamaran □ trimaran

□ **powerboat** □ outboard □ inboard

□ **other** □ inflatable □ rowing dinghy □ sailing dinghy

Hull material: □ fibreglass □ steel □ timber

□ fibre cement □ aluminium □ other

Length: ..... Beam: …….. Draft: …….. Weight: ……..

Hull colour: ……

Storage type: □ wet berth □ hardstand □ offsite

Please supply a current photo/ photos of your vessel.

OFFICE USE ONLY	Date
Application Received	/ /
Interviewed by Mooring Master	/ /
Approved by Committee	/ /
Letter of reply sent	/ /
Database updated	/ /
Treasurer - invoice	/ /