

# Yacht Register



VESSEL NAME.....

SAIL NO / REGISTRATION .....

DESIGN / CLASS.....

LOA (m) .....

PEN / MOORING LOCATION.....

AUDIT PERSON IN CHARGE .....

AUDIT P.I.C. PHONE .....

SAFETY CATEGORY .....

AUDIT COMPLETE.....

2017-18 STICKER ISSUED.....

PUBLIC LIABILITY INSURANCE PROVIDED .....

INSURER .....

POLICY NO.....

RENEWAL .....

OWNER NAME .....

MHYC MEMBER NO.

OWNER PHONE.....

OWNER EMAIL .....

SECONDARY CONTACT NAME.....

SECONDARY CONTACT PHONE .....

SECONDARY CONTACT EMAIL.....

Please return completed form to the MHYC Sailing Office – [sailing@mhyc.com.au](mailto:sailing@mhyc.com.au)