



VISITING VESSEL FORM

OFFICE USE ONLY	
Allocation:	
<input type="radio"/> MF	<input type="radio"/> HM
<input type="radio"/> Correspondence to visitor	

FSC ACCESS		
	Y / N?	How Many?
Access Key		
Car Pass		

STAY DETAILS			
Arrival	Departure	No. Nights	INTERNATIONAL / INTERSTATE VISITORS
			<input type="checkbox"/> Customs <input type="checkbox"/> AQIS <input type="checkbox"/> Fisheries

CUSTOMER DETAILS			
First Name	Surname	Member No. and Club	
Phone (home)	Phone (mobile)	Phone (work)	
Address		Suburb	Post Code
Email			
Emergency Contact Name		Phone	

VESSEL DETAILS			
Vessel Name	Type <input type="checkbox"/> Power <input type="checkbox"/> Yacht	Make of vessel	
Vessel overall length (m) <small>(including bowsprit, davits, marlin boards etc.)</small>	Beam (m)	Draft (m)	Weight (T)
Insurance Company	Policy Number	Policy Expiry __/__/__	
Vessel Registration No.	Registration Expiry __/__/__	State or country registered	
<input type="checkbox"/> <i>I have attached a current copy of my vessels insurance policy and registration. This needs to be supplied with application.</i>			

DECLARATION	
By signing and submitting this form to Fremantle Sailing Club, I agree that the vessel has current registration and insurance including public liability cover up to \$10 million.	
Applicants Signature _____	Date __/__/__

Please contact the Harbour Master on 0433 024 790 **30 minutes** prior to arrival for mooring instructions

(E) hm@fsc.com.au | (P) (08) 9435 8800 | (F) (08) 9435 8873 | (PA) PO Box 860, Fremantle, WA 6959