Cruising Yacht Club of South Australia
Register of Vessels Form

VESSEL DETAILS

Name of Vessel.....

Owned By.....

Type of Vessel: Power / Sail

Make/Model Type of Vessel .....

If sail, please advise if: (Circle)

Registration No.....

Fixed Keel / Drop Keel / Centre Board

Sail No.....

Where is your vessel kept?.....

Colour of Hull.....

Berth Number…….☐ N/A

Is a radio fitted? Yes / No (Circle)

Length overall .....
(Including any bow/stern overhang)

If so, what type – HF / VHF / 27 MHZ (Circle)

Beam .....

What is your call sign?.....

Draught.....

POWER

Will you be using shore power? Please Circle: Yes / No

If yes, for what purpose?.....

All power leads are to be fitted with a screw type shroud fitting

My power lead from shore power to my vessel has been tagged: ☐ (Please tick to confirm)

Expiry date……..

I understand that I am not permitted to use an un-tagged or out of date power cord: ☐ (Please tick to confirm)

ISOLATING TRANSFORMERS / GALVANIC ISOLATORS OR BLOCKERS ARE REQUIRED IF SHORE POWER IS USED

Do you have an isolating transformer / galvanic isolator / blocker in-built in vessel? Yes / No

If not in vessel, in Locker Box? Yes / No

INSURANCE / CONTRACTOR REGULATIONS

Please attach a copy of the current insurance schedule for your vessel if not insured with the CYC Discretionary Trust with the Club's broker, AIB. ☐ (Please tick to confirm)

Please Note: Your insurance policy on your vessel must include $20,000,000 Third Party Legal Liability Cover (as at Dec 07)

I understand that any contractor working for me on property managed by the CYCSA must be registered with the CYCSA, have appropriate insurance as required by the CYCSA, and have received a formal induction from the nominated CYCSA staff member. ☐ (Please tick to confirm)

Please Note: Members who use contractors without insurance will be liable in the event of an accident. It remains the responsibility of the member to ensure that contractors who work on property managed by the CYCSA have the appropriate insurance. Members are urged to check their contractor's insurance, particularly if the vessel is in excess of 8 metres in length

I declare the above information to be correct.

SIGNATURE .....

Date: .....

Contact No (Home) .....

(Mobile / Bus).....

Postal Address: .....

Email .....