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BOOKING FORM FOR BAREBOAT YACHT CHARTER

Please complete both pages

Party Leader Name		Tel. (work)	
Address		Tel. (home)	
		Mobile	
How Did You Hear Of Top Yacht?		E-mail	

Yacht Type / Name	
Start Base	
Finish Base	
Start / Finish Dates	

PARTY DETAILS

Please enter details of all party members as per passport, including Party Leader.

TITLE	FIRST NAME (as per passport)	MIDDLE NAME(S) (as per passport)	SURNAME (as per passport)	DATE OF BIRTH

TRAVEL INSURANCE

It is a term within our booking conditions that all party members must have adequate travel insurance, at least equivalent to that recommended by us. Top Yacht accepts no responsibility for any incidents involving uninsured passengers.

For comprehensive and competitive Yachtsman's Travel Insurance, we suggest Topsail Insurance. For further information please visit www.top-yacht.com and click the link through to 'Insurance'.

SAILING EXPERIENCE

For most countries, Sailing Certification and a Radio Operators Licence are mandatory. It is the client's responsibility to ensure they hold the correct documentation for charter. Please contact us for further details.

Skipper	Number of years as cruising skipper (fully responsible for crew and vessel)?	
	On average, number of days per year sailed?	
	Competent to deal with basic mechanical tasks, such as checking oil and monitoring engine performance and temperature?	YES / NO
	Any marine claims in the past 5 years? If so, please explain on additional paper.	YES / NO
	Competent and confident to sail this yacht?	YES / NO
	Please complete a brief resume of sailing experience, <u>including</u> Qualifications and Certificates held:	
Crew	Please list all crew with a brief resume of sailing experience, <u>including</u> Qualifications and Certificates held:	

OPTIONAL EXTRAS – CHECK WHEN BOOKING

Outboard		Cruising chute	
Skipper no. of days required		Towels / linen sets	
Kayak		Airport Transfers	
Child netting		Other	
Special Requirements?			

YACHT SECURITY DAMAGE DEPOSIT / INSURANCE

Option 1: <u>Non-Refundable</u> Security Deposit Insurance (not available in all destinations)	
Option 2: <u>Refundable</u> Security Deposit	

PAYMENT DETAILS

Card Type	Visa / MCard / Debit / Amex/ JCB	Amount in GBP £ / EURO € / US Dollar \$	
Name as on card		Valid From	
Card Number		Expiry Date	
Issue No. (debit card only)		CCV number	
Address Card Registered to			
Please debit card with final balance when due	YES / NO *	* Payments by credit card or AMEX will be subject to 1% charge	

Cheques should be made payable to **Top Yacht Sailing Ltd.** **Bank Transfers** can be paid into the following account (in any currency).

Santander UK PLC
2 Triton Square
Regent's Place
London NW1 3AN

Sort Code 09 01 29
Account No 16877946
IBAN: GB34 ABBY 0901 2916 8779 46
SWIFT / BIC: ABBYGB2L

In submitting or signing this form I certify that I am authorised to make the booking on behalf of the persons named above and that I am responsible for ensuring due payment of all monies in respect of this booking. I confirm that I have read and accept the Booking Conditions on the website.

Party Leader's Signature <small>(paper version only)</small>		Date	
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