

Boat Name

Crew - Personal Information

Please save this form to your own computer BEFORE you fill it in. Then, open the file from your computer, fill it in, and save the changes before sending it to the race committee at entry@vicmaui.org

First Name		Last Name		
Street		City		
Prov/State		PC/Zip		
Phone		Email		
Gender		*Citizenship		
*Birthdate		*Residency		
*Passport no. * required by US Customs and Border Protection		*Passport expiry		
Emergency Co	ntact Information:			
Relation to you				
First Name	First Name Last Name			
Phone	Phone Alt. Phone			
Training & Qualifications:				
ISAF Approved Offshore Personal Survival course – cert. expiry date; (submit copy of certificate)				
First Aid Certification – course and expiry date; (submit copy of certificate)				
Radio Operator C	ertification			
Other certifications or qualifications				
Sailing/racing experience: (most recent distance races or passages)				
Date	Details (name of race or description of passage; race category; duration/distance)		Boat type	Crew position

Crew Position