



# Port Hacking Game Fishing Club Inc.

## Safety Rescue Information Form

Boat Name \_\_\_\_\_ Registration Number \_\_\_\_\_

Boat on the Club Register of **Port Hacking GFC** GFC Length \_\_\_\_\_

Make \_\_\_\_\_ Colour-Hull \_\_\_\_\_ Deck \_\_\_\_\_

Colour - Flybridge \_\_\_\_\_ Distinctive Features or Markings \_\_\_\_\_

Engine(s) Type \_\_\_\_\_ Number \_\_\_\_\_ H.P. \_\_\_\_\_ Fuel Type \_\_\_\_\_

Capacity \_\_\_\_\_ Range \_\_\_\_\_ Speed-Cruising \_\_\_\_\_ Max Speed \_\_\_\_\_

Name of Boat Insurer \_\_\_\_\_ Policy Number \_\_\_\_\_ Renewal Date \_\_\_\_\_

Vessel Moored/Garraged At \_\_\_\_\_

In the case of Trailer Boats - Trailer Registration Number \_\_\_\_\_

Emergency Contact Name (Not to be onboard vessel) \_\_\_\_\_

Boat Captains Address \_\_\_\_\_ Tel. \_\_\_\_\_

Boat Captains Mobile Number \_\_\_\_\_ Email \_\_\_\_\_

Boat Owners Name (if not the Boat Captain) \_\_\_\_\_ Tel. \_\_\_\_\_

Boat Owners Address (if not the Boat Captain) \_\_\_\_\_

Note: Contact the email address that you provide on this form may be used by Any Central Zone Club or NSWGFA Central Zone for the purpose of informing you of future Tournaments or services.

	YES	QTY	DETAILS	NO
Radios on Board	<input type="checkbox"/>	_____	SSB HF FREQUENCIES _____	<input type="checkbox"/>
	<input type="checkbox"/>	_____	27MHZ FREQUENCIES _____	<input type="checkbox"/>
	<input type="checkbox"/>	_____	VHF FREQUENCIES _____	<input type="checkbox"/>
	<input type="checkbox"/>	_____	MAKE _____ Registration # _____	<input type="checkbox"/>
	YES	QTY	DETAILS	NO
FIRE EXTINGUISHERS	<input type="checkbox"/>	_____	TYPE _____	<input type="checkbox"/>
BILGE PUMPS	<input type="checkbox"/>	_____	MANUAL/MECH _____	<input type="checkbox"/>
FLARES	<input type="checkbox"/>	_____	TYPE _____	<input type="checkbox"/>
SMOKE SIGNALS	<input type="checkbox"/>	_____	_____	<input type="checkbox"/>
DINGHY	<input type="checkbox"/>	_____	TYPE & COLOUR _____	<input type="checkbox"/>
LIFERAFTS	<input type="checkbox"/>	_____	MANUFACTURE & CAPACITY _____	<input type="checkbox"/>
LIFEBOUYS	<input type="checkbox"/>	_____	TYPE & COLOUR _____	<input type="checkbox"/>
LIFEJACKETS	<input type="checkbox"/>	_____	COLOUR _____	<input type="checkbox"/>
RADAR	<input type="checkbox"/>	_____	RANGE _____	<input type="checkbox"/>
DEPTH SOUNDS	<input type="checkbox"/>	_____	DEPTH _____	<input type="checkbox"/>
COMPASSES	<input type="checkbox"/>	_____	HAND - HELD/FITTED _____	<input type="checkbox"/>
SEA ANCHORS	<input type="checkbox"/>	_____	_____	<input type="checkbox"/>
ANCHORS	<input type="checkbox"/>	_____	MUD/REEF _____	<input type="checkbox"/>
FOOD	<input type="checkbox"/>	_____	NUMBER OF DAYS PER PERSON _____	<input type="checkbox"/>
FRESHWATER	<input type="checkbox"/>	_____	NUMBER OF DAYS PER PERSON _____	<input type="checkbox"/>