

**SOYC Request for Club Coastal Skipper status**

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| **APPLICANT DETAILS** |
| **Name** |  |
| **E-Mail address** |  |
| **I have read and understood the sailing orders relating to this qualification** |
| **Signature** |  |

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| **Qualifications** | **Certificate details** |
| **Date** | **Number** |
| SOYC Day Skipper appointment |  |  |
| SOYC Improve Your Skills Course |  |  |
| RYA First Aid |  |  |
| RYA Shore-based Coastal Skipper Theory Course |  |  |
| RYA/MCA Yachtmaster Coastal Certificate |  |  |
| Maritime Radio Operator Certificate of Competence - Short Range Certificate |  |  |
| SOYC Practical Radar **OR** RYA Radar Certificate if yacht skippered Radar equipped |  |  |
| Logged Sea time*To be confirmed by SOYC Director of Sailing* | **Total Days** | **Club Days** | **Night hours** |
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| Approved by |  |
| Signed: |

Please complete this form , add scanned copies of any certificates not already noted on your Club Record. Send it to the Director of Sailing, sailing@soyc.co.uk and to training@soyc.co.uk