

AdventureSail

SKIPPER'S BOATING EXPERIENCE RESUME

A sound knowledge of boating and safety at seas essential to ensure you have a safe sailing experience.

NAME: _____ Date of Birth: _____ Phone numbers (Home and mobile) _____

SKIPPER'S EXPERIENCE

Most Recent Bareboat Charters

Year	#days	Type & Size of Vessel	Sailing Area	Pos'n
_____	_____	Sloop(1 mast and headsail) small	Coastal or lake	Skipper
_____	_____	Sloop(1 mast and headsail) small	Coastal or lake	Crew
_____	_____	Sloop(1 mast and headsail) small	Coastal or lake	Crew
_____	_____	Sloop(1 mast and headsail) small	Coastal or lake	Crew

Other relevant Experience

Year	#days	Type & Size of Vessel	Sailing Area	Pos'n
_____	_____	Sloop(1 mast and headsail) small	Coastal or lake	Skipper
_____	_____	Sloop(1 mast and headsail) small	Coastal or lake	Crew
_____	_____	Sloop(1 mast and headsail) small	Coastal or lake	Crew
_____	_____	Sloop(1 mast and headsail) small	Coastal or lake	Crew

How long have you been actively sailing? _____Years

- Do you usually day sail, cruise or race? _____
- How many days per year as a skipper? _____Days As crew? _____

MARINE COURSES & QUALIFICATIONS:

Year	Qualification	Provider	Type
_____	_____	_____	Recreational
_____	_____	_____	Recreational
_____	_____	_____	Recreational

Level of experience Assessment

Anchoring	Limited (<30 times)	Experience	Very experienced
Chart Reading	Limited (<30 times)	Experience	Very experienced

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VHF Radio	Limited (<30 times)	Experience	Very experienced
Course Setting	Limited (<30 times)	Experience	Very experienced
GPS	Limited (<30 times)	Experience	Very experienced
Heavy Weather	Limited (<30 times)	Experience	Very experienced

If you have had additional information, such as offshore passages or other experiences, include below or attach on separate sheet:

Crew Details

NAME:

Date of Birth:

Contact phone number

NAME:	Date of Birth:	Contact phone number

DECLARATION: I certify that this information is correct and it is my understanding the if the owner/operator is not fully convinced at the time to charter that I am capable of skippering the vessel, a skipper and/or crew may be placed on board at the Charterer's expense. No refund applies.

Skipper's signature _____

Date _____

Save as: Skipper's name (robertredfordresume.doc) for email

Post to: AdventureSail, Po Box 14215, Tauranga

Email to: adventuresail@hotmail.com