

**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](mailto:sailing@soyc.co.uk) and to [training@soyc.co.uk](mailto:training@soyc.co.uk)