



Waitara Offshore Fishing Club (Inc.)
Boat Registration Form

Boat Owner / Skipper: _____

Address: _____

Phone: _____ Cell-phone: _____

Boat Name: _____

Radio Call Sign: _____

Boat Make: _____ Length: _____ Colour: _____

Motor Type: _____ Motor HP: _____

Vehicle Registration Number: _____

Boat Trailer Registration Number: _____

Member of Coastguard: _____

Safety Equipment

CB / VHF: _____ EPRIB – Type: _____

Flares: _____ First Aid Kit: _____

Life Jackets: _____ Fuel Capacity: _____

Fire Extinguisher: _____ Chart Plotter: _____

Emergency Contact Details

Name: _____

Address: _____

Phone Number: _____ Cell-Phone: _____

Relationship to Owner / Skipper: _____

If you could send a photo of your boat to wofc@wofc.co.nz we will keep on file.

(All these details will be forwarded to the Taranaki Coast Guard unless you advise us otherwise)