

**TOPSHAM MOORING OWNERS ASSOCIATION**  
**APPLICATION FORM FOR REGISTRATION OF**  
**VESSEL/MOORING AT OAK SLIP**

OS1

This form should be completed and returned to the Secretary, together with a cheque for £25.00. The application for registration will be considered by the Committee for approval. Please read notes **OS1N** before completing the form. Consideration will only be given to:

- applicants who supply full details of their boat

Please use BLOCK LETTERS

**PERSONAL DETAILS OF VESSEL OWNER:**

NAME .....

ADDRESS .....

.....

.....

POSTCODE .....

**CONTACT TELEPHONE NOS:** ..... **MOBILE:** .....

**EMAIL:** .....

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*For office use only*  
**OAK SLIP REGISTRATION**  
Application granted/declined

Date: .....

Mooring registration no:  
.....

**DESCRIPTION OF YOUR BOAT:**

TYPE AND MAKE:.....

LENGTH excluding bowsprit: ..... LENGTH OF BOWSPRIT: .....

[Length must include any outboard drive]

DRAUGHT: ..... BEAM: .....

TYPE OF KEEL.....

OTHER INFORMATION FOR IDENTIFICATION: .....  
.....

**Please supply insurance details, if relevant**

Policy No: ..... Name of Insurer: .....

I will comply with the registration requirements and confirm that the details set out in this form are correct.

SIGNED: ..... DATE:.....