

**CONFIDENTIAL**

## Hawkestone Yacht Club - Emergency Contact Form

This form is to be completed annually, and is **due by November 30<sup>th</sup> each year**.

This information will be used/released in the event of an emergency, as deemed necessary by the management of Hawkestone Yacht Club (the Club). This form is to be completed and returned with your payment to **Treasurer at Hawkestone Yacht Club, Box 313, Oro Station, Ontario L0L 2X0** or e-mailed to Membership Director at [membership@hawkestoneyachtclub.com](mailto:membership@hawkestoneyachtclub.com)

| <b>YOUR PERSONAL INFORMATION</b>                         |  | <b>IS THIS A CHANGE?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes |  |
|--|--|---|--|
| Name:  |  |   |  |
| Spouse or partner's name:                                |  |   |  |
| Address:<br><i>(street, city, province, postal code)</i> |  |   |  |
| Tel (primary):   |  | Employer:   |  |
| Tel (secondary):   |  | City of employment:   |  |
| Email:   |  | Tel (work):   |  |

| <b>EMERGENCY CONTACT INFORMATION</b> |  |               | <b>IS THIS A CHANGE?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes                     |       |  |
|--------------------------------------|--|---------------|---|-------|--|
| <b>CONTACT #1 – PLEASE SPECIFY</b>   |  |               | <input type="checkbox"/> Personal/Medical <input type="checkbox"/> Boat <input type="checkbox"/> Both |       |  |
| Name:                                |  | Relationship: |   |       |  |
| Address:                             |  | City:         |   | Code: |  |
| Tel (primary):                       |  | Tel (work):   |   |       |  |
| Tel (secondary):                     |  | e-mail:       |   |       |  |

| <b>EMERGENCY CONTACT INFORMATION</b> |  |               | <b>IS THIS A CHANGE?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes                     |       |  |
|--------------------------------------|--|---------------|---|-------|--|
| <b>CONTACT #2 – PLEASE SPECIFY</b>   |  |               | <input type="checkbox"/> Personal/Medical <input type="checkbox"/> Boat <input type="checkbox"/> Both |       |  |
| Name:                                |  | Relationship: |   |       |  |
| Address:                             |  | City:         |   | Code: |  |
| Tel (primary):                       |  | Tel (work):   |   |       |  |
| Tel (secondary):                     |  | e-mail:       |   |       |  |

I have informed my emergency contact(s) about this designation, and I hereby authorize the management of Hawkestone Yacht Club to use this information as deemed necessary should a situation arise in which either I require emergency assistance, or I am unable to be contacted should an emergency arise related to my vessel. If any of the above information changes, I will notify the Club as soon as possible.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Over...

April 2019

# Hawkestone Yacht Club

## Insurance Declaration

The information regarding insurance is necessary to protect the Club and its members. Please complete this page and return it by email to the harbourmaster by mail to **Hawkestone Yacht Club, Box 313, Oro Station, Ontario L0L 2X0** or email to [membership@hawkestoneyachtclub.com](mailto:membership@hawkestoneyachtclub.com)

| YOUR VESSEL'S INFORMATION & INSURANCE |  | IS THIS A CHANGE? <input type="checkbox"/> No <input type="checkbox"/> Yes |
|---------------------------------------|--|--|
| Boat Manufacturer:                    |  | Boat name:   |
| Length:                               |  | Beam:  |
| Insurance company:                    |  |  |
| Policy #:                             |  | Expiration date (dd/mm/yy):  |

**A copy of the main page of your boat insurance form must be included indicating that the boat is insured beyond the lift-in date.**

**NOTE:** Vessel insurance information is due by lift-in each year. Failure to submit means your boat will **not** be lifted in and you may forfeit your harbour assignment.

The member shall indemnify and hold harmless Hawkestone Yacht Club (the Club) and its directors, officers, officials, and agents from and against all losses, claims, demands, payments, suits, actions, recoveries, and judgments of every nature and description brought or recoverable against it or them by reason of any negligent act, negligent error, or negligent omission of the member, boat owner and/or operator arising out of, resulting from, or in anyway related to the use of the Club for boat moorage in Hawkestone Yacht Club harbour and/or storage on the Club property. The member agrees that the Club shall not be held liable or responsible for any loss under any circumstance whatsoever, including loss caused by accident, fire, explosion, wind, sea, weather, and/or loss caused by theft of vessel, equipment, gear or other property either upon the vessel or the Club property and/or loss caused by vandalism. The member agrees to read the Mast Crane Training document and takes full responsibility of safely stepping and unstepping of their boat masts. The member agrees to only drink water from faucets bearing 'UV treated well water' signs. Furthermore, the member shall procure and maintain for the duration of this membership, insurance against claims for injuries to persons or damages to property which may arise from or in connection with the use of the boat while moored and/or stored on Club property.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_