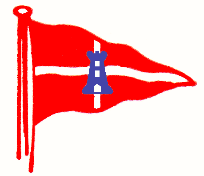
***EAST COWES*  *SAILING CLUB***

**Clarence Road, East Cowes, Isle of Wight, PO32 6ET**

**Website** [www.eastcowessc.co.uk](http://homepages.rya-online.net/ecsc)

**Storage Ashore Application 2020**

|  |
| --- |
| **Member Name:** |

|  |  |
| --- | --- |
| **All boats other than kayaks and tenders must provide insurance details.** | |
| **Boat Name:** |  |
| **Boat Size** (length x beam x draught) |  |
| **Keel Type** (for example: bilge, long, triple) |  |
| **Requested Day and Date Out:** |  |
| **Requested Number of Weeks Ashore:** |  |
| **Insurance Company:** |  |
| **Policy Number:** |  |
| **Policy Expiry date:** |  |

|  |  |  |
| --- | --- | --- |
| **All stored Items must be identified with the member’s name and telephone number.** | | |
| **Tender (no more than 4 square metres ):** | Number and sizes (length x beam) |  |
| **Kayak:** | Number and lengths |  |
| **Sail Store:** | Bay number |  |
| **Trailer storage:** | Number, sizes (length x width) and location |  |
| **Locker:** | Number and IDs |  |
| **Outboard Store:** | Number and types (e.g. 4 stroke, 2 stroke or electric) |  |
| **Fuel Store** | Number, fuel type and capacity of containers |  |

**Note: storage fees must be paid in full, on receipt of the invoice,**

**and for the entire period requested on the form.**

|  |  |
| --- | --- |
| **Signature:** | **Date:** |

**Return form addressed to RC Stores, to ECSC letter box**

**RC Stores 07799642016**