

INSURANCE DECLARATION ALL VESSELS, EABC 2024

VESSEL OWNERS INSURANCE DECLARATION FORM



a) INSURANCE DECLARATION

(Including but not limited to: Dinghies, Paddle Boards Wind Surfers, Canoes, Day boats, Motorboats and Keel boats).

Please PRINT:	I declare that my boat/craft has a minimum of third-party liability insurance:
Boat Name and/or Sail Number	
Third-Party Liability of £'s (Enter sum in £'s)	
Insurance Company:	
Policy Number:	
Your Name (PRINTED):	
Your Signature:	
Date:	

In confirming that the above information is correct I will undertake to ensure adequate continuous insurance cover for my boat/craft for the duration of my membership and use of East Antrim Boat Club grounds and facilities.

I also confirm that anyone working at my boat/craft (voluntarily or commercially) will be covered by my boat/craft insurance or have their own Third Party Liability Insurance cover.

YARD SUPERVISORS and/or SAILING COMMITTEE are instructed by the General Committee that non-compliance with this procedure disallows movement of your boat/craft within Club grounds or participation in Club events.

b) YARD OPERATIONS (applicable to yard, crane, mooring pontoon and tractor use.)

I declare that I have a copy of the current Yard Operation Manual 2024 and agree with the terms and conditions therein.

Your Name (PRINTED)	
Your Signature:	
Date:	

ALL INSURANCE DECLARATIONS MUST BE COMPLETED by 30th APRIL EACH YEAR.

Please return completed forms to the Yard Manager or post in the internal black post box situated at the EABC Bar Door.