



INLAND WATERWAY HELMSMANS INSTRUCTOR COURSE APPLICATION FORM

Please complete all sections below and overleaf.

I wish to attend the following course:

Date: _____

Venue: _____

Full name: _____

Address: _____

County: _____

Postcode: _____

Tel (home): _____

Tel (work): _____

Mobile: _____

Fax: _____

Email: _____

RYA membership no: _____

Age: _____ Date of birth: _____

Emergency Name: _____

Emergency Tel no: _____

Dietary Requirements: _____

You are required to hold the following certificates prior to qualification. Please enclose photocopies with this application form.

Inland Waters Helmsman Certificate

Date of course: _____

Venue: _____

First Aid Certificate

Date of course: _____

Venue: _____

Pre-course experience

No. of season's experience on the inland waterways: _____

Main cruising areas: _____

Type of boats used: _____

Are you a boat owner? Yes / No If yes, what type of boat? _____

Other relevant experience: _____

Where will your instructor qualification be used: _____

Other RYA qualifications held:

Other teaching/training qualifications held:

Declaration of fitness to take part in the course

I declare that I am not suffering from any physical or mental impairment which has an adverse effect on my ability to properly discharge my duty of care as an instructor. I undertake to inform the RYA if this changes and agree to submit to a medical examination if requested by the RYA.

Signed:

Date:

Booking conditions

- *Places are allocated on a first come first serve basis. A place will be given to you on receipt of a fully completed application form, payment and copies of the 3 certificates. If copies of the certificates are not supplied, the application form will be returned and you will not be given a place on the course.*
- *The RYA reserves the right to cancel or change the date/venue of the course and will do so if the minimum amount of delegates has not been met.*
- *Once the application has been received no refund will be made*
- *You will be given lunch, however, in order to keep costs down neither an evening meal nor accommodation will be provided, so you will need to make arrangements if this is required.*

Payment

Please enclose a cheque for £404 payable to 'RYA' or complete the credit card payment section below:

Credit card no:

Start date: - Expiry date: -

Security Code (from back of card): Issue No (Switch cards):

Cardholder's name:

Cardholder's address (if different to above):

Please return your completed application form with payment and copies of your certificates to:

Patricia Leeson-Smith
Training Department
RYA House
Ensign Way
Hamble
Southampton SO31 4YA Tel: 023 8060 4188