

EMERGENCY INFORMATION

YACHT NAME: _____ SAIL NUMBER

AVAILABLE CELLULAR PHONES ON BOARD including any satellite phones (please give full number with country code, area code)

PRIMARY CONTACT PERSON IN EMERGENCY (a person not on board who should be the first person contacted in an emergency)

NAME: _____ TELEPHONE: ADDRESS:

Please describe below any medical condition of any crew member which may be relevant in circumstances of search and rescue. (This information will be treated with confidentiality and only passed on to SAR authorities in an emergency)

SIGNATURE (skipper) DATE: _____

