

SKY “Join the Crew” QUESTIONNAIRE

1. Are you a boater Y N
2. Are you prone to motion sickness Y N
3. If yes, how long have you been boating?
4. What has been your longest passage in days?
5. What leg or legs do you want to join?

1. Are you going as a couple or single
2. Have you skippered or crewed a boat
3. Will you help in keeping the boat clean Y N
4. Are you willing to participate with supervision in sailing the boat Y N
5. What are your expectations on joining the crew of SV SKY?

CREDIT CARD AUTHORIZATION FORM

Name:

Address:

City:

State:

Zip

Card Type:

Card Number:

Exp. Date:

Security Code:

Signature:

Date: