CANADIAN COAST GUARD AUXILIARY (M) INC.

Application For Membership

Update Facility Report: _____

Name: _____
surname given int

Address:_____
_____
_____
_____
_____Postal Code_____

Phone - Home : _____
Work : _____
Cell : _____
Next of Kin: _____

Vessel Name: _____
Owner: _____ Capt: _____ Crew: _____
Zone: _____ Unit: _____
Usual Home Port: _____

Date of Birth: Day _____Month_____Year_____
Canadian Citizen: Yes:_____ No:_____
Occupation: (Optional)_____

Other Interests _____
_____
_____
_____

VESSEL DESCRIPTION

(Owners only)

Type : _____
fishing, pleasure, commercial
Overall Length : _____
Beam : _____
Draft : _____
Material : _____
wood, fiberglass, steel, others
Gross Reg. Ton : _____
Year Built : _____
Official License # : _____

C S I Valid : _____
No. of Engines & Make : _____
Diesel or Gas : _____
Model : _____
H.P. : _____
Date engine installed : D: ____ M _____ Yr. _____
Max. Speed : _____
Cruising Speed : _____
Fuel Consumption pr. hrs. : _____

VESSEL COLOR

Hull : _____
Deck : _____
Cabin : _____
Housetop : _____

Condition of Vessel: _____

COMMUNICATION EQUIPMENT

	Stand-by	Call Sign
VHF on Board:	_____	_____
VHF Land Base:	_____	_____
C.B. Vessel:	_____	_____
C.B Land Base:	_____	_____
Restricted R. Lic:	_____	_____
S.S.B. Radio:	_____	_____
Others:	_____	_____

EQUIPMENT ON BOARD VESSEL

Plotter : _____
Compass: _____
Charts : _____
Loran-C : _____
GPS : _____

Radar : _____
Sounder : _____
Direction Finder : _____
Liferaft, Dory, Etc. : _____
EPIRB : _____

Floater Suit(s) : _____
Portable Pump : _____
Aux. Generator : _____
Search Light : _____
First Aid Kit : _____

FAIR MARKET VALUE OF VESSEL: $

VALUE OF FISHING GEAR: $

THE ABOVE DESCRIBED VESSEL IS OFFERED FOR USE WITH CCGA (M) INC.

In consideration of acceptance as a member of the CCGA (M) Inc. I _____ do hereby expressly waive any and all right whatsoever to any and all salvage claim which might arise by reason of the operation of an "Auxiliary Vessel" in "Authorized Activities" as defined in the CONTRACT of agreement between the aforementioned incorporation and HER Majesty the Queen, in Right of Canada. By this waiver I forgo the remedies provided by the CANADA SHIPPING ACT in exchange for all the right and privileges bestowed upon me by virtue of my membership in the CCGA (M) Inc.

Dated at: _____ on _____

Signature of Applicant : _____ **Witness Signature : _____**

UNIT LEADER : _____ **Date: _____**

ZONE DIRECTOR : _____ **Date: _____**

C.C.G.A. EXECUTIVE : _____ **Date: _____**