

APPLICATION FOR RECOGNITION - SHOREBASED (CLASSROOM) COURSES

Full name of Principal	
Full name of training centre	
Address where course are run	
	Postcode:
Address for public to contact	
	Postcode:
	Tel No Email Website
Address to which RYA correspondence should be sent	
	Postcode:
	Tel No Email Website

I wish to apply for recognition to run the following RYA Shorebased (classroom) courses:

Please tick as appropriate:

- | | |
|---|---|
| <input type="checkbox"/> Diesel Engine | <input type="checkbox"/> Marine Radio Short Range Certificate |
| <input type="checkbox"/> Radar | <input type="checkbox"/> Basic Sea Survival |
| <input type="checkbox"/> RYA/ISAF Offshore Safety Course | <input type="checkbox"/> First Aid |
| <input type="checkbox"/> Essential Navigation and Seamanship* | <input type="checkbox"/> Day Skipper* |
| <input type="checkbox"/> Coastal Skipper/Yachtmaster® Offshore* | <input type="checkbox"/> Yachtmaster® Ocean* |

*The Essential Navigation & Seamanship, Day Skipper, Coastal Skipper/Yachtmaster®, Yachtmaster® Ocean courses will be:

- | | |
|--|------------------------------------|
| <input type="checkbox"/> Evening classes | <input type="checkbox"/> Intensive |
|--|------------------------------------|

Do you wish to advertise your centre on the RYA website? Yes / No

If yes, please supply the Training Centre's latitude and longitude

Please list below the proposed RYA qualified instructor(s) for all of the courses ticked. If recognition is granted, subsequent changes in instructional staff should be referred to the RYA for approval.

Full Name	Post Code	Date of Birth	RYA Membership number if known	Please specify which courses the instructor will be teaching

CONT... APPLICATION FOR RECOGNITION - SHOREBASED (CLASSROOM) COURSES

I have read and understand the conditions of recognition and conduct of courses set out in the Guidance Notes for Shorebased Recognition.

I understand that it is a condition of recognition that an initial recognition fee may be payable to the RYA on application and an annual fee payable thereafter during January.

The appropriate fee(s) are attached, if applicable.

I understand that recognition may be withdrawn at the discretion of the RYA and that the RYA can spot check a course at any time.

I enclose an Account Application form (required for new centres only) Yes/No

Signed _____ (Principal) Date _____

Print name: _____

Payment: ☐ I enclose a cheque for £ _____ payable to RYA
☐ Please charge £ _____ to the credit card below:

Card Type (e.g. Visa, Mastercard, Delta, Switch etc):

Card Number

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Start Date

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 Expiry Date

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 Issue No.

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 3 digit security no.

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Name of card holder: _____

Signature of card holder: _____ Date: _____