

TITLE	FIRST NAME	SURNAME

**ADDRESS**

**POSTCODE**

**EMAIL ADDRESS (BLOCK CAPITALS PLEASE)**

LANDLINE	MOBILE

**2019 PERMIT NUMBER(S) CLUB/ORGANISATION**

	DINGHY 1	DINGHY 2	DINGHY 3
<b>DINGHY TYPE (PLEASE TICK)</b>			
SAILING	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ROWING	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
OTHER (please specify)	<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> _____
<b>DINGHY DETAILS</b>			
Class & Sail Number			
Length category (please tick) Shown as metres	<input type="checkbox"/> SMALL (under 2.75m) <input type="checkbox"/> MED (2.75 - 3.9m) <input type="checkbox"/> LRGE (3.91m – 4.8m)	<input type="checkbox"/> SMALL (under 2.75m) <input type="checkbox"/> MED (2.75 - 3.9m) <input type="checkbox"/> LRGE (3.91m – 4.8m)	<input type="checkbox"/> SMALL (under 2.75m) <input type="checkbox"/> MED (2.75 - 3.9m) <input type="checkbox"/> LRGE (3.91m – 4.8m)
Beam (m/cm) <b>MAX 1.9m</b>			
Dinghy Name			
Hull colour			

**YOUR TROLLEY MUST NOT EXCEED THE DINGHY'S LENGTH AND BEAM BY 0.5M IN TOTAL**

**HOW WE USE YOUR DATA**

- Contacting you regarding the dinghy park, including sending a reminder when applications open for the new season
- Performing our contract with you

{ } **please tick here** if you would be happy for us to contact you about other services we offer.

**I wish to apply for a permit to store my dinghy on Hamble Foreshore. I confirm that I have read and agree to abide by the current Terms and Conditions and that the dinghy is my property and is insured against public liability. If I relinquish my space before the end of the season, I understand that a refund cannot be issued.**

SIGNED \_\_\_\_\_ DATED \_\_\_\_\_

**Please return this form by 31<sup>st</sup> January 2020 to:**

Hamble Parish Council, Hamble Memorial Hall, 2 High Street, Hamble, Southampton HANTS SO31 4JE

**Once a space has been allocated to you, we will send details of how to make BACS payment. Your permit(s) will be posted to the above address following receipt of your payment.**

SPACE ALLOCATED: \_\_\_\_\_ DATE PAID: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ POSTED: \_\_\_\_ / \_\_\_\_ / \_\_\_\_