

# OYA CHARTERS

# Charter Application

Name (Master of Vessel): \_\_\_\_\_ Age: \_\_\_\_\_

Date of Birth \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Charter Dates \_\_\_\_\_ to \_\_\_\_\_

Orientation Dates (2 days stay aboard at OYA, Oxford MD) \_\_\_\_\_

**1. When did you begin boating?** \_\_\_\_\_ **Type of boat** \_\_\_\_\_

**2. How many years have you been skippering?** \_\_\_\_\_

Boating License  USCG License  USCG Academy  USN Academy  Kings Point, etc

**3. Largest size and type yacht/boat skippered:** \_\_\_\_\_

Total number of years: \_\_\_\_\_ What Waterways: \_\_\_\_\_

**4. Yacht now owned or previously owned:** \_\_\_\_\_

LOA: \_\_\_\_\_ Engine: \_\_\_\_\_

**5. Any chartering experience as skipper:**

Year: \_\_\_\_\_ Duration: \_\_\_\_\_ Yacht type/size: \_\_\_\_\_

Location: \_\_\_\_\_ Charter company: \_\_\_\_\_

Year: \_\_\_\_\_ Duration: \_\_\_\_\_ Yacht type/size: \_\_\_\_\_

Location: \_\_\_\_\_ Charter company: \_\_\_\_\_

**6. Anchoring experience (indicate number of times):**

Single bow anchor \_\_\_\_\_ Double bow anchors \_\_\_\_\_ Docking \_\_\_\_\_

Bow & stern anchors \_\_\_\_\_ Pick-up mooring \_\_\_\_\_

**7. Navigation skills** (mark box for each category):

	Expert	Advanced	Average	Some	None
Chart Reading	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Coastal Piloting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Navigating in limited visibility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Electronic Navigation Equipment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
USCG, Power Squadron	<input type="checkbox"/>				
Do You Use Active Captain?	<input type="checkbox"/>				

**8. First Mate's name:** \_\_\_\_\_ **Age:** \_\_\_\_\_

Boating experience: \_\_\_\_\_

**9. Any additional information that would be useful in evaluating your abilities?**

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