

# ISLE OF SKYE YACHTS (a trading name of Skye Yachts Limited)

The Boatyard, Ardsvar, Isle of Skye, IV45 8RS

[www.isleofskye-yachts.co.uk](http://www.isleofskye-yachts.co.uk)

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Tel 01471 844216

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## CHARTER BOOKING FORM

Name and Address (please use CAPITALS)

.....

Contact Details

.....

Tel. ....(Home)

.....

Tel. ....(Work)

.....

Tel. ....(Mobile)

Postcode.....

Fax .....

Email address. ....

Please may I reserve the following boat type (s).....

From ..... to ..... (dates)

<b>Please supply me the following options</b>	<b>Price per week <u>including</u> VAT</b>	<b>Please tick as required – state quantity and/or size</b>
SKIPPER	£525	
SLEEPING BAGS	£15 per hire	
OUTBOARD ENGINE (including 5 litres petrol)	£45	
WATERPROOF CLOTHING	£21 per set	
<b>EXTENDED CRUISING LIMITS</b> (see map on back of Brochure). Permission, charts and pilots <b>NORTH</b> (incl. St Kilda) and/or <b>SOUTH/OTHERS</b>	£25 for first area and £15 for subsequent sets	

I enclose a non-refundable deposit of \_\_\_\_\_ per boat per week (or part thereof) and will pay the full charter fee 28 days prior to departure. (£300 for boats less than 38ft and £500 for boats greater than 38ft.)

If you wish to pay the deposit by Credit/Debit Card then please telephone or fax us with the details including the three digit “card security code” from the rear of the card.

A security deposit of £600 will be added to your final invoice. This will be refundable less a charge for consumables and any damages/losses within 10 days of your return.

I understand that I remain liable for the full charter fee if I have to cancel at less than two calendar months notice. Please send me details of the Holiday Cancellation / Personal Insurance scheme to cover such an eventuality.  
YES / NO.

Details of my own and my crew’s experience are listed overleaf. (No experience is required for Skippered Charters). The total number sailing in my party will be \_\_\_\_\_

I have read and agree to the conditions of charter.

SIGNED \_\_\_\_\_

DATE \_\_\_\_\_

**EXPERIENCE: PLEASE GIVE FULL NAMES OF SKIPPER AND ALL CREW**

	<b>NAME AND ADDRESS</b> ( If different from overleaf )	<b>RELEVANT QUALIFICATIONS</b>	<b>EXPERIENCE</b> (Continue on a separate sheet if necessary)
<b>SKIPPER</b>			
<b>FIRST MATE</b>			
<b>SECOND MATE</b>			
<b>OTHER CREW</b>			
<b>OTHER CREW</b>			
<b>OTHER CREW</b>			
<b>OTHER CREW</b>			
<b>OTHER CREW</b>			
<b>OTHER CREW</b>			
<b>OTHER CREW</b>			

**FOR OFFICE USE ONLY**

<b>DEPOSIT ACKNOWLEDGED</b>		<b>INVOICE SENT</b>	
<b>DATABASE</b>		<b>PAYMENT RECEIVED</b>	
<b>PRICE</b>		<b>SAILING DEPOSIT REPAID</b>	