

# Chesapeake Sailing Charters

## Online Sailing Resume

Name \_\_\_\_\_

Address \_\_\_\_\_  
Street City State Zip

Phone (Home) \_\_\_\_\_ (work) \_\_\_\_\_ (Fax) \_\_\_\_\_ (Mobile) \_\_\_\_\_

Email \_\_\_\_\_

Driver's License Number & State \_\_\_\_\_

Employer & Address \_\_\_\_\_

Date of Birth \_\_\_\_\_ U.S. Citizen? \_\_\_\_ If No, Where? \_\_\_\_\_

How many years experience sailing do you have? \_\_\_\_\_

As captain? \_\_\_\_\_ As crew? \_\_\_\_\_ Cruising or Racing? \_\_\_\_\_

What areas have you sailed? \_\_\_\_\_

Please note any boats that you have owned in the past 10 years.

Type and Size	Engine Type	Dates Owned	Location
(1)	_____	_____	_____
(2)	_____	_____	_____
(3)	_____	_____	_____

Please note any boats that you have chartered in the past 12 years.

Type and Size	Charter Company	Dates	Location	Captain or Crew
(1)	_____	_____	_____	_____
(2)	_____	_____	_____	_____
(3)	_____	_____	_____	_____
(4)	_____	_____	_____	_____
(5)	_____	_____	_____	_____

Has any damage occurred to a vessel while you were captain? \_\_\_\_\_  
If yes, please give some details.

Please discuss your experience with navigation, anchoring and piloting particularly with respect to docking.

Please list any sailing schools which you have attended or seamanship courses completed and any certifications received. On what size boat were these courses offered?

Please give two references familiar with your sailing history. These can be charter companies, sailing schools, clubs or people with whom you have sailed.

Name \_\_\_\_\_ Office Tel \_\_\_\_\_ Home Tel \_\_\_\_\_

Address \_\_\_\_\_

Name \_\_\_\_\_ Office Tel \_\_\_\_\_ Home Tel \_\_\_\_\_

Address \_\_\_\_\_

Please give us any additional information which you think would help in assessing your sailing skills.

Chesapeake Sailing Charters may perform a check-out on the water before your departure. Chesapeake Sailing Charters reserves the right to assign a qualified captain at your expense if it is found that you are operating the boat irresponsibly or negligently or if you are unable to operate the boat safely and competently.

I certify that the information provided here is true and complete and that nothing detrimental to my qualification has been omitted.

Signature \_\_\_\_\_ Date \_\_\_\_\_

[Typing your name here will be accepted as your signature]

This resume will help in determining your qualifications for the boat you have chosen. We cannot complete your charter agreement prior to a review of this resume. This form can be filled out online and returned to us via Email. Click on the Send Sailing Resume button below to send this form via Email. Please print out a copy for your records. It can also be returned via fax or mail to:

Chesapeake Sailing Charters  
5614 Dover Street  
Churchton, MD 20733

Tel 703.244.9829  
Fax 443.607.8898  
Email [customerservice@chesapeakesailingcharters.com](mailto:customerservice@chesapeakesailingcharters.com)