

Sonars Recreational Float Plan

Boat Name: _____

Date: _____

Crew Member List:

Captain-_____. Phone Number-_____

Crew-_____. Phone Number-_____

Crew-_____. Phone Number-_____

Crew-_____. Phone Number-_____

Crew-_____. Phone Number-_____

Crew-_____. Phone Number-_____

Weather: _____

Time Out: _____

Time In: _____

- Boat has been checked over and is in good working order
- Captain and all crew have signed a waiver
- Captain has reviewed the laminated boarder sailing map of Hampton Roads

Boat Log: _____

According to USCG regulations, the following accidents must be reported in a formal, written report within 24 hours to USCG: whenever damage over \$2000 was made; severe injury was required or loss of life occurred; and disappearance of any person from a vessel.

(Captain's Signature)

(Date)