

Ship's Manifest

Captain: _____

Emergency Contact: _____

Address: _____

City, State, Zip: _____

Telephone: _____

Crew #1: _____

Address: _____

City, State, Zip: _____

Experience: _____

Crew #2: _____

Address: _____

City, State, Zip: _____

Experience: _____

Crew #3: _____

Address: _____

City, State, Zip: _____

Experience: _____

Crew #4: _____

Address: _____

City, State, Zip: _____

Experience: _____

Crew #5: _____

Address: _____

City, State, Zip: _____

Experience: _____

Crew #6: _____

Address: _____

City, State, Zip: _____

Experience: _____

Please use another sheet of paper for additional members of your crew.