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|  | **KLUB ŻEGLARSKI UNIWERSYTETU WARSZAWSKIEGO** |
| **KARTA REJSU** |

# INFORMACJE O KAPITANIE

Imię i nazwisko: *Krzysztof Nowak* stop. żegl. / mot. i nr pat.: *JSM nr PU/6056, MSM nr 031669, NŻ nr 5*

Nr tel.: *+48 690 510 766* adres e-mail: *k.k.nowak.97@gmail.com*

# INFORMACJE O JACHCIE

Klasa i nazwa jachtu: *…………………………………* nr rej.: …………………………….. Lc [m]: *…………..*

Port macierzysty: *……………………………………* moc silnika [kW]: *……………..*

# INFORMACJE O REJSIE

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| Port zaokrętowania: | Data: | Pływowy: TAK / NIE |
| Port wyokrętowania: | Data: | Pływowy: TAK / NIE |
| Odwiedzone miejsca: ………………………………………………………………………………………………………………..  ………………………………………………………………………………………………………………………………………….  …………………………………………………………………………………………………………………………………………. | | |
| W tym liczba portów pływowych: | Liczba dni rejsu: | |

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| GODZINY ŻEGLUGI | | | | | GODZINY  POSTOJU | PRZEBYTO MIL MORSKICH |
| razem (pod żaglami  i na silniku) | pod żaglami | na silniku | po wodach pływowych | powyżej 6oB | w portach i na  kotwicy |
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**INFORMACJE O ZAŁODZE**

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| --- | --- | --- | --- |
| *Lp.* | *Imię i nazwisko* | *stopień żegl./mot.* | *funkcja na jachcie* |
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| *Lp.* | *Imię i nazwisko* | *stopień żegl./mot.* | *funkcja na jachcie* |
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**UWAGI KAPITANA** ……………………………………………………………………………………………………………………

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*miejscowość, data podpis kapitana*

**UWAGI ARMATORA / PRZEDSTAWICIELA ARMATORA / WŁAŚCICIELA JACHTU** ……………………………………...

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*miejscowość, data podpis armatora / przedstawiciela / właściciela*

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|  | **WARSAW UNIVERSITY SAILING CLUB** |
| **CAPTAIN’S CERTIFICATE OF PASSAGE** |

# INFORMATION ABOUT CAPTAIN

Name & surname: …………………………………………………. cert. of sailing / motor competency, No.: ………………….

Phone.: ………………………………………………….. email: …………………………………………………………………….

# YACHT’S INFORMATION

Model and name: ………………………………………………… Reg. No.: …………………………….. LOA [m]: …………….

Home port: …………………………………………………………………….. Engine power [kW]:………………………………..

# CRUISE INFORMATION

|  |  |  |
| --- | --- | --- |
| Port of embarkation: | Date: | Tidal port: YES / NO |
| Port of disembarkation: | Date: | Tidal port: YES / NO |
| Visited places: ………………………………………………………………………………………………………………………..  ………………………………………………………………………………………………………………………………………….  …………………………………………………………………………………………………………………………………………. | | |
| Number of tidal ports: | Number of cruise days: | |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| NUMBER OF HOURS UNDERWAY | | | | | NUMBER OF  MOORING HOURS | TRIP NM |
| total (sails & engine) | under sails | using engine | on tidal waters | over 6oB | in harbours & on anchor |
|  |  |  |  |  |  |  |

**INFORMATION ABOUT CREW**

|  |  |  |  |
| --- | --- | --- | --- |
| *No.* | *name & surname* | *certificate* | *rank* |
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| --- | --- | --- | --- |
| *No.* | *name & surname* | *certificate.* | *rank* |
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**CAPTAIN’S COMMENTS** ……………………………………………………………………………………………………………..

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*place and date captain’s signature*

**OWNER’S COMMENTS** ………………………………………………………………………………………………………………

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*place and date owner’s signature*