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DATE: \_\_\_\_\_



### INTERNATIONAL, INC.

757 S.E. 17<sup>TH</sup> Street, Suite 113, Fort Lauderdale, FL 33316

## CREW REQUEST CONFIRMATION

NAME OF VESSEL: \_\_\_\_\_ SIZE \_\_\_\_\_

MAKE/TYPE: \_\_\_\_\_ YEAR: \_\_\_\_\_

LOCATION OF VESSEL: \_\_\_\_\_ YACHT FLAG REGISTRY: \_\_\_\_\_

SAIL \_\_\_ POWER \_\_\_ COMMERCIAL \_\_\_ CHARTER \_\_\_ PRIVATE \_\_\_ TEMP or PERM \_\_\_\_\_

NAME OF REQUESTOR: \_\_\_\_\_

TELEPHONE: CELL # \_\_\_\_\_ OFFICE or HOME # \_\_\_\_\_

OWNER: \_\_\_ CAPT. \_\_\_ AGENT \_\_\_ EMAIL: \_\_\_\_\_

BILLING ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ COUNTRY \_\_\_\_\_

Cr.Cd.# \_\_\_\_\_ Exp. Date \_\_\_\_\_ cvc code # \_\_\_\_\_

CREW REQUIRED	SALARY	BENEFITS

PERM \_\_\_ TEMP \_\_\_ DEL \_\_\_ LIVE ABD \_\_\_  
 CREW AGES:(+) \_\_\_\_\_ (-) \_\_\_\_\_  
 SMOKE? \_\_\_\_\_ DRINK? \_\_\_\_\_  
 MALE \_\_\_\_\_ FEMALE \_\_\_\_\_ EITHER: \_\_\_\_\_  
 LANGUAGE: \_\_\_\_\_  
 NO.of CREW: \_\_\_\_\_  
 WHERE CRUISING: \_\_\_\_\_  
 NO. of GUESTS: \_\_\_\_\_

GENERAL INFORMATION:

### SEE REFERRAL AGREEMENT FOR TERMS OF FEES AND PAYMENT

SIGNATURE OF AUTHORIZED REQUESTOR \_\_\_\_\_ DATE \_\_\_\_\_

Please sign and fax copy to CREWFINDERS for receipt of information