

CRUISE BOAT FLOAT PLAN



Duluth - Superior
Sailing Association

Date of Day Sail _____

Name of Vessel _____

Captain _____ Deck Hand _____

On Board Cell Phone _____

Who's on Board?		
Name	Age	Emergency contact name/phone

Trip Details					
Depart Time		Anticipated Return Time		Latest Return Time	
Sailing Route					

Captains Signature _____

DSSA Representative Signature _____