



Sailing Event Notification Form

IMPORTANT

Notification must be submitted a minimum of six weeks prior to the event date, or the organiser may be in breach of the *Marine Safety Regulation 2016*. Contact Roads and Maritime Services on 13 12 36 for more information about late notifications.

Notifications can be made for an event (or a series of events) up to 12 months in advance.

Please submit form to psaq@rms.nsw.gov.au a minimum of six weeks prior to the commencement of any sailing event.

Please ensure that all fields on the notification form are complete.

Details of the sailing event organiser

Organisation (if applicable)

Surname

Given names

Position held

Residential/business address (PO Box No. is not acceptable)

<input type="text"/>
<input type="text"/>
<input type="text"/>
Postcode

Postal address (if same as residential/business address, write 'as above')

<input type="text"/>
<input type="text"/>
<input type="text"/>
Postcode

Private phone number

Business phone number

Mobile phone number

Email address

Designated liaison officer (if not organiser)

Surname

Given names

Position held

Address

<input type="text"/>
<input type="text"/>
<input type="text"/>
Postcode

Private phone number

Business phone number

Mobile phone number

Email address

Privacy Statement and Declaration

Roads and Maritime Services is collecting your personal and event information to enable it to regulate events on NSW waterways and may retain and use it to enforce marine legislation.

You must provide this information as a condition of the sailing activity exemption.

Roads and Maritime may publish or disclose your personal information to inform the public about events you plan to hold on NSW waterways. Roads and Maritime may also disclose your personal information in order to verify the information you have provided, in order to make enquiries about marine accidents, and to other agencies responsible for marine management.

Other than as described in this statement Roads and Maritime will not disclose your personal information without your consent unless authorised by law.

Your personal information will be held by Roads and Maritime and you can contact us at www.rms.nsw.gov.au to access or correct it.

I consent to the disclosure of my personal information and declare that the information on this form is true and complete (Tick the box to agree and progress your exemption application.)

I consent to the disclosure of my personal information.

Event information *(continued)*

Event 3 *(continued)*

Maximum number of vessels	Type(s) of vessel(s)
<input type="text"/>	<input type="text"/>

Relevant authorities notified of sailing event(s)

Sailing event dates (please insert specific dates where sailing is expected to occur)

Start date:	Start time:	Finish time:	End date:
<input type="text"/> day / month / year	<input type="text"/> : <input type="text"/> AM PM	<input type="text"/> : <input type="text"/> AM PM	<input type="text"/> day / month / year

Recurring:

<input type="checkbox"/> Weekly <i>Enter day(s) of the week (eg Monday)</i>	<input type="text"/>
<input type="checkbox"/> Fortnightly <i>Enter day(s) of the week (eg Monday)</i>	<input type="text"/>
<input type="checkbox"/> Monthly <i>Enter day(s) of the month (eg 15th, 20th)</i>	<input type="text"/>
<input type="checkbox"/> Yearly <i>Enter all event dates</i>	<input type="text"/>

What infrastructure are you using for the event?

Form submission

Once completed, please submit this form by selecting the appropriate button below. Your information will be electronically sent to Roads and Maritime Services for processing.

If you are completing a printed version of this form, please scan and email to psaql@rms.nsw.gov.au.

Event 4 (continued)

Maximum number of vessels	Type(s) of vessel(s)
<input type="text"/>	<input type="text"/>

Relevant authorities notified of sailing event(s)

Sailing event dates (please insert specific dates where sailing is expected to occur)

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<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
day / month / year	: AM PM	: AM PM	day / month / year

Recurring:

<input type="checkbox"/> Weekly <i>Enter day(s) of the week (eg Monday)</i>	<input type="text"/>
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