



### Braye Harbour Booking Form (Bailiwick Vessels)

All details must be completed and this form emailed to the harbour office **48 Hours** before arrival.

[harbour@alderney.gov.gg](mailto:harbour@alderney.gov.gg)

*In providing the details below you are confirming that the information is true and accurate and that you consent to the retention and use of your personal data in accordance with our Fair Processing Notice*

#### Travel Information

| Travel Information        |  |
|---------------------------|--|
| Date of Arrival           |  |
| Estimated Time of Arrival |  |

#### Vessel Information

| Vessel Information                      |  |
|---|--|
| Name of Vessel                          |  |
| Port of Registry                        |  |
| Vessel Insurance Details                |  |
| Last Port of Call                       |  |
| No of People Aboard<br>(Including Crew) |  |

#### Crew/ Passenger Information (must be completed for all crew and passengers)

| Crew/ Passenger  |   |
|--|---|
| Name   |   |
| Residential Address (Including Post Code)  |   |
| Contact Phone Number<br>(preferably mobile phone)  |   |
| <b>Declaration:</b><br>I do not have any of the symptoms of COVID 19 and have not travelled from outside the Bailiwick of Guernsey or been in close contact with a confirmed | You may make the declaration by signing the document or by making your declaration by entering the words "Confirmed" or "Not confirmed" |

|   |  |
|---|--|
| case of someone with COVID 19 or someone awaiting test results or displaying symptoms of COVID 19.  |  |
| <b>Crew/ Passenger</b>  |  |
| <b>Name</b>   |  |
| <b>Address (Inc. Post Code)</b>   |  |
| <b>Contact Phone Number (preferably mobile phone)</b>   |  |
| <b>Declaration:</b><br>I do not have any of the symptoms of COVID 19 and have not travelled from outside the Bailiwick of Guernsey or been in close contact with a confirmed case of someone with COVID 19 or someone awaiting test results or displaying symptoms of COVID 19. |  |

|   |  |
|---|--|
| <b>Crew/ Passenger</b>  |  |
| <b>Name</b>   |  |
| <b>Address (Inc Post Code)</b>  |  |
| <b>Contact Phone Number (preferably mobile phone)</b>   |  |
| <b>Declaration:</b><br>I do not have any of the symptoms of COVID 19 and have not travelled from outside the Bailiwick of Guernsey or been in close contact with a confirmed case of someone with COVID 19 or someone awaiting test results or displaying symptoms of COVID 19. |  |

| Crew/ Passenger   |  |
|---|--|
| <b>Name</b>   |  |
| <b>Address (Inc Post Code)</b>  |  |
| <b>Contact Phone Number (preferably mobile phone)</b>   |  |
| <b>Declaration:</b><br>I do not have any of the symptoms of COVID 19 and have not travelled from outside the Bailiwick of Guernsey or been in close contact with a confirmed case of someone with COVID 19 or someone awaiting test results or displaying symptoms of COVID 19. |  |

| Crew/ Passenger   |  |
|---|--|
| <b>Name</b>   |  |
| <b>Address (Inc Post Code)</b>  |  |
| <b>Contact Phone Number (preferably mobile phone)</b>   |  |
| <b>Declaration:</b><br>I do not have any of the symptoms of COVID 19 and have not travelled from outside the Bailiwick of Guernsey or been in close contact with a confirmed case of someone with COVID 19 or someone awaiting test results or displaying symptoms of COVID 19. |  |
| Crew/ Passenger   |  |
| <b>Name</b>   |  |
| <b>Address (Inc Post Code)</b>  |  |

|   |  |
|---|--|
|   |  |
| <b>Contact Number</b>   |  |
| <b>Declaration:</b><br>I do not have any of the symptoms of COVID 19 and have not travelled from outside the Bailiwick of Guernsey or been in close contact with a confirmed case of someone with COVID 19 or someone awaiting test results or displaying symptoms of COVID 19. |  |