**APPLICATION FOR MEMBERSHIP**

The majority owner or charterer (in the case of a charter registration) of the vessel may make an application to become a CISOA member, in order to become a “qualified person” under the Ship Registration Act 2007, as amended by the Maritime Transport Act 2008.

**Details of Vessel**

|  |  |  |
| --- | --- | --- |
| **Ship’s Name** | **Length** | **Gross Tonnage** |
|  |       |       |

**Details of Owner/Charterer**

*(Enter here details of the company, or individual, who owns the vessel)*

|  |  |
| --- | --- |
| **Owner/Charterer name and postal address** | **Contact Details** |
|       | **Phone** |       |
| **Facsimile** |       |
| **Mobile/24-hr** |       |
| **E-mail** |       |
| *If Owner is a company:*1. *Attach copy of incorporation document*
2. *Supply director details below and provide a scanned passport of the primary point of contact*

*If Owner is an individual, please attach copy of Passport.* |

**Director Details**

|  |  |  |  |
| --- | --- | --- | --- |
| **First name** |       | **Surname** |       |
| **Email** |       | **Mobile** |       |
| **Address** |       |

**Details of the person signing on behalf of the Owner/Charterer (if applicable)**

|  |  |  |  |
| --- | --- | --- | --- |
| **Full name** | **Title** | **Citizenship** | **Address** |
|       |  |       |       |
| **Phone** |  | **Fax** |       |
| **Email** |       | **Mobile** |       |
| *The Applicant is Owner/Charterer**If Others, please detail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****If Applicant is not the Owner/Charterer, attach Authorisation of the Owner****I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­\_\_\_\_, acting for the following entity \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­\_\_\_\_ as owners of the vessel known as \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­\_\_\_, hereby apply to join the Cook Islands Ship Owners Association (a society incorporated in the Cook Islands).­* |

**Beneficial Owner**

*(Enter here details of the beneficial owning company, or individual, if different from above)*

|  |  |
| --- | --- |
| **Beneficial owner name and postal address** | **Contact Details** |
|       | **Phone** |       |
| **Facsimile** |       |
| **Mobile/24-hr** |       |
| **E-mail** |       |
| *If Beneficial owner is a company:*1. *Attach copy of incorporation document*
2. *Supply director details below and provide a scanned passport of the primary point of contact*

*If Owner is an individual, please attach copy of Passport.* |

**Director Details**

|  |  |  |  |
| --- | --- | --- | --- |
| **First name** |       | **Surname** |       |
| **Email** |       | **Mobile** |       |
| **Address** |       |

|  |  |  |  |
| --- | --- | --- | --- |
| **First name** |       | **Surname** |       |
| **Email** |       | **Mobile** |       |
| **Address** |       |

|  |  |  |  |
| --- | --- | --- | --- |
| **First name** |       | **Surname** |       |
| **Email** |       | **Mobile** |       |
| **Address** |       |

|  |  |  |
| --- | --- | --- |
| I hereby appoint the Registrar of Ships of the Cook Islands to act on my behalf at any meetings of CISOA that I am unable to attend, on condition that I am notified in advance of the agenda and that the Registrar undertakes to follow my instructions, if so given. | YES |  |
| NO |  |

**Delivery of CISOA Membership**

This will be sent to Owners/Charterers address above however, if you would like it sent to a separate address, please enter below.

|  |
| --- |
| **Alternative Delivery Address** |
|       |

|  |  |
| --- | --- |
| **Signed at** |  |
| **Signed on (DD/MM/YY)** |  |

**Name (printed) & Signature of Owner / Charterer / Authorised Person**

**Declaration**

Owner or other authorised person must complete this declaration; if person other than Owner or person in Part 4, please complete Declarant details.

|  |  |
| --- | --- |
| **Full name of Declarant** |       |
| **Relationship to Owner** |       |
| **Physical address** |       |
| **Postal address** |       |
| **Email** |       |
| **Phone** |       |
| *(Delete as appropriate):* The Owner declares / The Declarant declares on behalf of the Owner/Charterer 1. That the information given in this and all supporting documents are, to the best of my knowledge and belief, true and correct.
2. That neither the Owner/Charterer nor the Beneficial owner is associated with any of the individuals or entities listed on the UN mandated Sanctions list found at: <https://www.un.org/sc/suborg/en/sanctions/un-sc-consolidated-list>

This Declaration shall be made before a Justice of the Peace, or a Commissioner for Oaths, Solicitor, Notary Public or the Registrar or Deputy Registrar of Ships of the Cook Islands Ships Registry or before any person authorised by law to administer oaths in the country where the declaration is made. |

|  |
| --- |
| **Signature and full name of Witness** |
|  |
| **Occupation and address** |
|  |

|  |
| --- |
| **Signature of Declarant / Date** |
|  |