



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

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 (Including Crew)	

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

Crew/ Passenger	
Name	
Residential Address (Including Post Code)	
Contact Phone Number (preferably mobile phone)	
Declaration: 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.	
Crew/ Passenger	
Name	
Address (Inc. Post Code)	
Contact Phone Number (preferably mobile phone)	
Declaration: 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	
Name	
Address (Inc Post Code)	
Contact Phone Number (preferably mobile phone)	
Declaration: 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	
Name	
Address (Inc Post Code)	
Contact Phone Number (preferably mobile phone)	
Declaration: 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	
Name	
Address (Inc Post Code)	
Contact Phone Number (preferably mobile phone)	
Declaration: 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	
Name	
Address (Inc Post Code)	

Contact Number	
Declaration: 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.	