

Note: Application for Recognition (AR1) or Change of Recognition (CR1) must accompany this form.

Name of training centre _____

I wish to apply for recognition to run the following RYA Inland Waterways courses:

☐ Inland Waterways Crew Course ☐ Inland Waterways Helmsman Course

Please list below the proposed RYA Chief Instructor for the course(s) ticked. An original signature for the Chief Instructor is required.

If recognition is granted, subsequent changes in instructional staff should be referred to the RYA for approval using form CR1.

Name of Chief Instructor	Postcode or DOB	RYA membership/ ref no.	RYA Instructor qualifications	Chief Instructor's signature acknowledging the responsibilities in RGN A3.3

Additional instructors:

Name	Postcode or DOB	RYA membership/ ref no.	RYA Instructor qualifications

Teaching fleet

Name of vessel	Licensing authority	Boat Safety Certificate	Expiry date

Principal's signature _____ Date _____