

2025 CHAMPIONSHIP BOAT REGISTRATION FORM	
Boat name:	Registration #:
Class:	
	_
Type: Mono / Tunnel / Other	Length:
Make:	Hull colour:
Model:	Deck Colour:
No of engines:	Type: Inboard / Outboard
Make:	Individual / Total capacity:
Model:	Individual / Total hp:
Driver:	Address:
Licence #:	Contact phone:
Co-driver / Throttles:	Address:
Licence #:	Contact phone:
Championship / Designated Driver*:	
*This is the person who will receive the championship points.	
I have read a copy of the National rules and the UIM Rule Book, and understand these are available for me to view from an NZOPA committee member, the NZOPA website <a href="https://www.nzoffshore.co.nz">www.nzoffshore.co.nz</a> , or the UIM website <a href="https://www.uimpowerboating.com">www.uimpowerboating.com</a> I hereby certify my boat complies with the minimum safety requirements required for my class	
☐ Yes ☐ No	
I hereby certify by boat and engines comply with all rules and guidelines outlined for my class.	
☐ Yes ☐ No	
Applicant's Signature	 Date