

The Honourable Company of Master Mariners
Application for membership
HQS Wellington, Temple Stairs, Victoria Embankment,
London, WC2R 2PN

Tel: 0207 836 8179 Fax: 0207 240 3082 E-mail: info@hcmm.org.uk

Surname	Correspondence Address			
First Names				
Rank or title				
Post-nominals (letters after your name)	Home address if different:			
Date of Birth				
Nationality	Tel			
Nationality	161			
Signature:	Mobile			
Date:	E-Mail			
Certificate of Competency held (if any):				
Class of Membership Applied for (Freemen or Member):				
Referee/Sponsor 1				
Deferee/Spancer 2				
Referee/Sponsor 2				
Please indicate (✓) the most appropriate venue for your informal membership interview:				
London	North East			
North East Scotland (Aberdeen)	North West (Liverpool)			
South West (Plymouth)	Solent (Southampton)			
Clyde (Glasgow)	Bristol Channel (Cardiff)			
Is this the Outport to which you would prefer to belong?				
Next of Kin:				
Title: First Name: Surname:				
Relationship: (Spouse / Father / etc)				

Career: Please attach a CV, if available, and complete the details below:				
Seagoing Experience:	Sea time (Years)	Year of last trip	Highest Rank	
Merchant Bulk Carrier				
Merchant Chemical Tankers				
Merchant Container				
Merchant Crude and Products Tankers				
Merchant Ferry, Passenger and RoRo				
Merchant Gas Tankers				
Merchant General Cargo				
Merchant Offshore				
Merchant Passenger				
Merchant Reefer				
Merchant Salvage				
Merchant Survey				
Merchant Other (specify)				
Naval Aircraft Carrier				
Naval Amphibious				
Naval Fishery Protection				
Naval Frigate / Destroyer				
Naval Hydrographic				
Naval Other (specify)				
Shoreside Experience:	From	То	Position	
Finance / Insurance				
Surveying				
Ship Management				
Ship Design / Construction				
Chartering				
Pilotage				
Marine Consultancy				
Legal (incl Expert Witness)				
Manufacturing				
Ports				
Research				
Training / Personnel				
Security				
Other (specify)				