## SCHUTZVEREIN DEUTSCHER RHEDER V.a.G.

GERMAN SHIPOWNERS' DEFENCE ASSOCIATION

# Attachment to Application for Membership (Co-Insurance) \*Required field

Name or Hull N	lo.:	* IMO No.:	
0) 7 10			
2) Insured C			
Company name			
3) Companie	es to be co-insured (§ 5 o	of the Statutes):	
a) Company na	me:		
		Phone:	
Full address:			
		* * E-mail:	
Capacity: *	Technical Manager	Commercial Manager	Crew Manager
	Pool Manager	Bareboat Charterer	Registered Owner
b) Company na	me:		
		Phone:	
Full address			
		* * E-mail:	
Capacity: *	Technical Manager	Commercial Manager	Crew Manager
	Pool Manager	Bareboat Charterer	Registered Owner

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### GERMAN SHIPOWNERS' DEFENCE ASSOCIATION

#### \*Required field

c) Company nai	me:		
		Phone:	
Full address:			
		* * E-mail:	
Capacity: *	Technical Manager	Commercial Manager	Crew Manager
	Pool Manager	Bareboat Charterer	Registered Owner
d) Company na	me:		
		Phone:	
Full address		* * E-mail:	
Capacity: *	Technical Manager	Commercial Manager	Crew Manager
	Pool Manager	Bareboat Charterer	Registered Owner
e) Company na	me:		
Full address		Phone:	
i dii addi ess		* * E-mail:	
Capacity: *	Technical Manager	Commercial Manager	Crew Manager
	Pool Manager	Bareboat Charterer	Registered Owner

**PRINT** 

Please email your application to application@shipdefence.de