



2019 SAIL ROYALTY LABEL ORDER FORM

YACHT NAME _____

HULL NUMBER 50/ _____ SAIL NUMBER _____

OWNER NAME _____

ADDRESS _____

VAT NUMBER or PLACE + DATE of BIRTH _____

MOBILE PHONE _____

EMAIL _____

APPLICATION DATE _____

SAIL ROYALTY LABEL REQUEST

New Sails

Sail Type	Sailmaker	Year Built	Sail ID No	Label No	Date of Issue	Measurer

Total labels requested

New Sails _____ x €50 per label = € _____

Payment

Bank Transfer Details (please mark your bank transfer with name of yacht):

ClubSwan50 Owners Association
Via G.Boccaccio, 50 50133 Florence

IBAN Code: IT 40 B030 6902 9211 0000 0014 425
Swift Code: BCITITMM

Signature _____

Date _____

Please return your form to:
ClubSwan 50 Class Manager
Email: class@clubswan50.com