



Commonwealth of Massachusetts

# MASSACHUSETTS ENVIRONMENTAL POLICE

Boat & Recreation Vehicle Safety Bureau • P.O. Box 1325, Forestdale, MA 02644 • Phone 508-564-4961 • Fax: 508-564-4964

## Massachusetts Boating Safety Certificate Application

**\*STUDENT MUST BE AT LEAST 12 YEARS OF AGE UPON FINAL EXAM TO REGISTER\***

### ALL FORM FIELDS REQUIRED

Student Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City/Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Gender: \_\_\_\_\_ Eye Color: \_\_\_\_\_ Hair Color: \_\_\_\_\_

### **Under 18:**

Parent/Guardian Name: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

### THE FOLLOWING SECTION SHALL BE COMPLETED BY THE COURSE INSTRUCTOR

INSTRUCTOR: I CERTIFY THAT THE ABOVE NAMED STUDENT HAS ATTAINED THE AGE OF 12 AT THE TIME OF TESTING AND HAS SUCCESSFULLY COMPLETED THE COURSE IDENTIFIED BELOW, IN ADDITION TO THE MASSACHUSETTS BOATING LAW TEST WITH A SCORE OF 80% OR HIGHER.

Organization: \_\_\_\_\_

Course Name: \_\_\_\_\_

Course Location: \_\_\_\_\_

Course Date(s): \_\_\_\_\_

Instructor Name: \_\_\_\_\_

Instructor Signature: \_\_\_\_\_

Course Score: \_\_\_\_\_ Course Score: \_\_\_\_\_

*To receive a Massachusetts Boating Safety Certificate, this form must be completed in full and submitted to the Massachusetts Environmental Police Boat & Recreation Vehicle Safety*