



2025-2026 Archipelago Shrimp Trawl CRMP Vessel Owner Agreement and Registration Form

Vessel Name: _____	Effective Date of Registration: _____
VRN: _____	Expiry Date: May 31, 2026
Vessel E-mail: _____	
Sat/Autotel#: _____	Cellular #: _____

<u>VESSEL OWNER INFORMATION:</u>	<u>ALTERNATE CONTACT INFORMATION:</u>	
Name: _____	Name: _____	
Address _____	Address _____	
_____ Licence #: _____	_____ Licence # _____	
Postal Code: _____ Phone: _____	Postal Code: _____ Phone: _____	
Cellular: _____ Fax: _____	Cellular: _____ Fax: _____	
Email: _____	Email: _____	
<u>Certification and Authorization:</u> <i>I hereby certify that I am the owner, or authorized signatory for the owner. I further certify that I have read, understand and accept the attached 2025/2026 Service Agreement and Fee Schedule, Shrimp Trawl CMRP. I agree to be personally responsible for the payment of any and all fees for the vessel.</i>		
_____	_____	_____
Print Name	Signature	Date

<u>GENERAL SERVICE AND BILLING INFORMATION</u>		
Billing Contact Name: _____	Phone: _____	Fax: _____
Billing Address: _____	City: _____	Postal Code: _____
Invoices delivered by: Fax: _____	E-mail : _____	

<u>AUTHORIZATION TO CHARGE CREDIT CARD:</u>		
<i>I hereby request and authorize Archipelago Marine Research Ltd. To charge to the credit card identified below:</i>		
Registration Fee (\$ <u>2,987</u> incl. 5% GST) ☐		
Name of Card Holder: _____	Card #: _____	
Card Expiry Date: _____	CVV # (3 digit # on back of card)	Card Type: Visa ☐ MasterCard ☐
Card Holder Signature: _____	Current Date: _____	

<u>Archipelago Use Only:</u>	Amount Paid: \$ _____ incl. 5% GST
By: Cash ☐ Credit Card ☐ Money Order ☐ Cheque ☐ Debit Card (in person only) ☐	
Authorization #: _____	Received by: _____ Date: _____ Invoice Entered ☐

Updates:	Equip Status	☐	Client Type/Price Level	☐	Vessel Dist.	☐	Portal	☐	Spst	☐
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ALTERNATIVE METHODS OF PAYMENT ACCEPTED FOR REGISTRATION FEE:

The Registration Fee is payable by credit card, debit card, cash or money order at the following locations. If paying by cheque please contact the Victoria office regarding delivery and processing times. Office hours may vary, please contact each location for hours of operation:

Victoria 525 Head Street V9A 5S1 Phone: 1-888-383-4535 Fax: (250) 383-0103	Prince Rupert 225 3 rd St. V8J 3J9 (250) 627-1167	Port Hardy #5 – 7053 Market St. V0N 2P0 (250) 949-7150	Ucluelet (no debit) #1 – 1920 Lyche Road V0R 3A0 (250) 731-4265
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