

STARSHIP REGISTRY ENTRY



NAME: _____
SERVICE DATE: _____
MISSION PROFILE: _____
TRAITS: _____

DESIGNATION: _____
SPACE FRAME: _____
REFIT: _____

SYSTEMS

ENGINES <input type="checkbox"/>	COMPUTERS <input type="checkbox"/>	WEAPONS <input type="checkbox"/>
BREACHES <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	BREACHES <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	BREACHES <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
STRUCTURE <input type="checkbox"/>	SENSORS <input type="checkbox"/>	COMMUNICATIONS <input type="checkbox"/>
BREACHES <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	BREACHES <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	BREACHES <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

POWER

CURRENT **TOTAL**

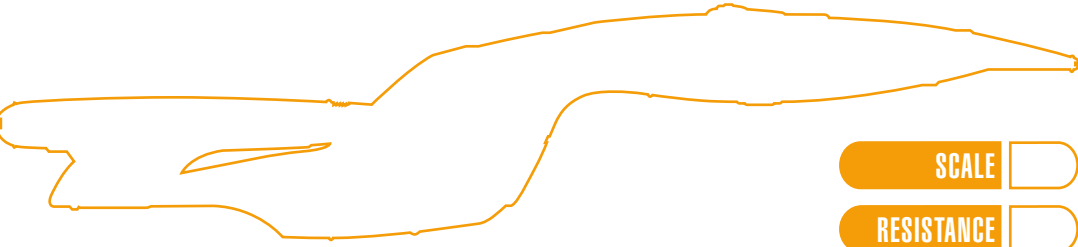
LAUNCH BAY

SHIELDS

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

CREW SUPPORT

CURRENT **TOTAL**



DEPARTMENTS

COMMAND <input type="checkbox"/>	SECURITY <input type="checkbox"/>	SCIENCE <input type="checkbox"/>
CONN <input type="checkbox"/>	ENGINEERING <input type="checkbox"/>	MEDICINE <input type="checkbox"/>

TALENTS

WEAPONS

NAME/TYPE	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
QUALITIES	<input type="text"/>		
NAME/TYPE	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
QUALITIES	<input type="text"/>		
NAME/TYPE	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
QUALITIES	<input type="text"/>		