

## WESTPOINT HARBOR GUEST SLIP APPLICATION

Name	Home p	phone number
Address		·
	Work phone number	
Email address	Cell pl	hone number
EmployerOccupation		oation
Business address		
Do you have partners in the	Vessel? If yes	es, list names and addresses:
Vessel name	CF/Doc	cumentation number
Make and model of Vessel_		Year built
Length overall	Beam Dr	PraftPower or sail
(Length overall includes ov	erhangs, bowsprits, d	davits, swim steps and pulpits)
Insurance companyExpiration date	Poli	Arrival/departurelicy numberPhone number
•		oplication is true and correct, and I hereby fy any of the above information.
Signature	Da	rate
	-	ure, and all fees must be paid in advance. ond the stated departure date.