



WESTPOINT HARBOR GUEST SLIP APPLICATION

Name _____
Address _____
Address _____
Home Phone _____ Cell Phone _____
Email _____ Driver's License _____
Employer _____ Occupation _____
Business address _____
Work phone number _____

Vessel name _____ CF/Documentation number _____

Make and model of Vessel _____ Year built _____

Length overall _____ Beam _____ Draft _____ Power or sail _____
(Length overall includes overhangs, bowsprits, davits, swim steps and pulpits)

Do you have partners in the Vessel? _____ If yes, list names and addresses:

Days you plan to stay at Westpoint Harbor _____
Arrival Date _____ Departure Date _____

Insurance company _____ Policy number _____
Expiration date _____

Emergency contact _____ Phone _____

Yacht club membership _____

I certify that the information provided on this application is true and correct, and I hereby authorize Westpoint Harbor or its agents to verify any of the above information.

Signature _____ Date _____

Checkout time is 12 noon on the date of departure and all fees must be paid in advance. Please advise the marina if you need to stay beyond the stated departure time or date.