

SAINT PAUL YACHT CLUB

100 YACHT CLUB ROAD #81 • ST. PAUL, MINNESOTA 55107-2030
TEL 651-292-8964 • FAX 651-227-2148

APPLICATION FOR DOCKAGE

Name _____ Tel. # _____ Bus. Tel. # _____
Street Address _____
City _____ State _____ Zip _____
Year of Boat _____ Manufacturer _____ Model _____
Boat Type _____ Length _____ Width _____
Is Boat Customized or Stock? _____ Hull # _____
Boat Registration # _____ Boat Name _____
Boat Powered By: _____ Weight _____ Height _____

Please attach a picture of the boat and a copy of the last survey if available.

Where Was Boat Last Docked? _____
Insurance Company _____ Policy # _____ Exp. Date _____
Insurance Agency _____ Tel. # _____

A current Certificate of Insurance for \$300,000 minimum liability is required by the St. Paul Yacht Club.

Summer & Winter _____ Summer Only _____ Electrical: 30 amp _____ Twin 30 amp _____ 50 amp _____
List Boating Experience _____
Occupation _____ Employer _____ Tel. # _____

Credit References (must list two):

Name _____ Tel. # _____
Address _____ Account # _____
Name _____ Tel. # _____
Address _____ Account # _____

It is your responsibility to notify the Marina Manager of any changes in address or telephone number or any conditions on your boat.

The SPYC will rely upon oral and written statements made by the above applicant. If the applicant's statements or representations are determined to be materially untrue or incomplete, SPYC shall have the right in its sole discretion to reject this applicant.

I agree to abide by the SPYC By-Laws and Standing Rules. I understand that boating at the SPYC is a privilege, not a right. My deposit of \$100.00 is attached to this application. If a suitable slip is offered but refused, the deposit is not refunded. I grant SPYC permission to contact the above listed references to verify credit.

I certify that all the above listed information is true and correct.

Signed _____ Date _____

THIS IS NOT AN APPLICATION FOR MEMBERSHIP