



# The Put-in-Bay Yacht Club Dock Reservation Form

Owner Name: \_\_\_\_\_ Length: \_\_\_\_\_  
 Boat Name: \_\_\_\_\_ Beam: \_\_\_\_\_  
 Phone Number(s): \_\_\_\_\_  
 E-mail (optional): \_\_\_\_\_  
 Credit Card (required): \_\_\_\_\_ Exp \_\_\_\_/\_\_\_\_  
 Address (required): \_\_\_\_\_

Dates Requested (1): \_\_\_\_\_ Nights: \_\_ Cost: \$\_\_\_\_\_  
 Dates Requested (2): \_\_\_\_\_ Nights: \_\_ Cost: \$\_\_\_\_\_  
 Dates Requested (3): \_\_\_\_\_ Nights: \_\_ Cost: \$\_\_\_\_\_  
 Additional Dates: \_\_\_\_\_ Nights: \_\_ Cost: \$\_\_\_\_\_  
 (after first three) \_\_\_\_\_ Nights: \_\_ Cost: \$\_\_\_\_\_  
 \_\_\_\_\_ Nights: \_\_ Cost: \$\_\_\_\_\_

## Dockage Check-in Form

*Sign and Return to Put-in-Bay Yacht Club Manager*

- REGULATIONS:** I have read the Put-in-Bay Yacht Club Regulations and agree to observe each and all of them as one of the considerations for the privilege of docking at the Put-in-Bay Yacht Club Docks. Further, I have no objections to or disagreements with any of the dock regulations.
- INSURANCE:** I currently have an active policy of insurance, fully insuring my boat and equipment against damage or theft, along with full coverage for any and all injuries to my crew, passengers, or guests.
- LIABILITY:** In the event that I, my crew, passengers or guests, should make a claim for any injury or loss whatsoever while my boat is moored at the Put-in-Bay Yacht Club docks, I agree to present said claim to my insurance carrier for satisfaction or reimbursement and will hold the Put-in-Bay Yacht Club harmless from any such claim.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Office Use Only:
Date Received: _____
Assignment: (1)____ (2)____ (3)____
Confirmation Sent:
Paid by: (1)____ (2)____ (3)____