



SAPPHIRE BEACH RESORT AND MARINA

Marina Check in Form

Vessel Name: _____ Slip #: _____ Type: Sail _____ Motor _____

Make: _____ Length: _____ Beam: _____ Draft: _____ Height: _____

Slip Owner: _____ Slip Renter: _____

CONTACT INFO: **Owner** **Captain** **Competent Local Operator**

Name: _____

Address: _____

City,St,Zip: _____

Cell Phone: _____

Phone(H/O) _____

Email: _____

Preferred Payment Method:

Cash Check Credit Card Online Bill n Pay Wire Transfer

Credit Card Information: MC VISA

(all charges will be billed upon departure or at months end)

CC# _____ Exp. __/__/__ CCV: _____ ZIP: _____

*Credit Card will be charged automatically at the end of month or if vessel departs the marina without checking out *

Hurricane Plan: Y / N _____

All vessels are required to depart the marina in the event of a Hurricane

Proof of Insurance (date received) _____ (please provide cover/proof of Ins.)

Vessel Registration Number: _____ Exp.Date: _____

Dockage Agreement and Marina Rules and Regulations received Y / N

Signature of Owner/Captain _____ Date: _____