

PIGEON KEY MARINA
2024 BOAT REGISTRATION

SLIP NUMBER A _____ B _____ C _____

OWNER NAME: _____
(LAST) (FIRST)

SPOUSE/SIGNIFICANT OTHER NAME: _____

HOME ADDRESS: _____

LOCAL ADDRESS: _____

HOME PHONE: _____

CELL PHONE: _____ SPOUSE/SIGOTHER CELL PHONE: _____

E-MAIL: _____ SPOUSE/SIGOTHER E-MAIL: _____

MAKE/MODEL OF BOAT _____ SAIL ___ POWER ___ LENGTH _____

BOAT MC NUMBER: _____ BOAT NAME: _____

IN CASE OF EMERGENCY CONTACT:

NAME: _____ PHONE: _____

IN CASE OF EMERGENCY DO DOCKHANDS HAVE PERMISSION TO BOARD YOUR BOAT/PERSONAL WATERCRAFT TO PROVIDE ASSISTANCE? YES/NO (CIRCLE ONE)

OWNER NAME: _____

LESSEE NAME: _____

I CERTIFY THAT THE BOAT OCCUPYING THE ABOVE REFERENCED SLIP IS PROTECTED BY A MARINE INSURANCE POLICY (AS REQUIRED BY THE CONDOMINIUM ASSOCIATION'S MASTER DEED AND BYLAWS) AND IF REQUESTED, WILL PROVIDE PROOF OF INSURANCE

SIGNATURE: _____
(DATE)

ANY CHANGES IN CONTACT INFORMATION, PLEASE SEND UPDATE INFORMATION TO THE FOLLOWING:

Whyreally2002@yahoo.com
pigeonkeym@gmail.com