

Cannonsgate at Bogue Sound Boat Slip Association, Inc.
Boat Registration

Date _____

Slip Number: _____ Lot Number: _____ Slip Owner: _____

Vessel Description: Year: _____ Make: _____ Model: _____

Registration State & Number: _____

USCG Documentation Number: _____

Vessel Owner of Record: Name _____

Address _____

Email _____ Telephone: (day) _____
(home) _____
(cell) _____

Insurance Agency: Name: _____ Telephone (o) _____
(c) _____

Address: _____

Email _____

Planned period of vessel use: _____

Hurricane Evacuation Plan of Acton: _____

Local Contact for boat removal/storage: _____

I understand that the marina has no requirement to safeguard or maintain the above described vessel. I assume all risk of loss or damage to the marina piers that this vessel may cause. I understand there are no restroom facilities. Water service is for non potable uses. Electric usage will be metered and periodically billed to the slip owner. I have read and will abide by the Cannonsgate Marina Rules of Conduct, Bylaws and Covenants.

Slip Owner Signature/Date

Vessel Owner Signature/Date

Enclosures:

- (1) Vessel Photo
- (2) Vessel Registration Copy
- (3) Insurance Certificate