

APPLICATION FOR MEMBERSHIP



600 Beach Road • West Haverstraw, NY 10993 • 845-429-2001 • fax 845-429-8353 • E-mail: boating@haverstrawmarina.com

PERSONAL INFORMATION

PERSONAL INFORMATION				Customer No. (Office only)	Email
Last Name	First Name	Birth Date	Name of Spouse/Partner		
Home Address	City	State	Zip	Home Phone	
Firm Name or Employer	Occupation			Cell Phone	
Business Address	City	State	Zip	Business Phone	
Person to Notify in Case of Emergency	Relationship	City, ST	Home Phone	Business Phone	Cell Phone

BOAT INFORMATION

Boat Name		Make	REG.#
		Year	Serial / Hull ID #
Power <input type="checkbox"/>	Swim Platform <input type="checkbox"/>	LOA	Insurance Carrier (Certificate of insurance required)
Sail <input type="checkbox"/>	Bow Pulpit <input type="checkbox"/>	Fiberglass	
		Metal	
		Draft	Wood
Boat Owner (If Other than Above)	Address	City	State Zip Home Phone

TRAILER INFORMATION

Vin #:	Make:	Year:
Plate #	Color:	Type: <input type="checkbox"/> Roller <input type="checkbox"/> Bunk

SEASONAL PREFERENCES

<i>Annual Preferences</i>	Winter Storage: <input type="checkbox"/> On Land <input type="checkbox"/> In Water	Summer Slip Preferences:			
<i>Summer Only</i>	Summer Slip Preferences	Electrical Requirements	1/30-125	1/50-250	1/50-125
<i>Winter Only</i>	<input type="checkbox"/> On Land <input type="checkbox"/> In Water		2/30-125	2/50-250	2/50-125

How did you first hear of Haverstraw Marina?	Signature
Previous Marina:	Date