

**Buzzards Bay Marina Corp.**

2 Main Street, PO Box 66, Buzzards Bay, MA 02532

508-759-1880 cell 508-564-2953

[www.bbaymarina.com](http://www.bbaymarina.com) email: [bbaymarina@aol.com](mailto:bbaymarina@aol.com)

**CONTRACT – 2010**

**Personal information**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Town \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone work: \_\_\_\_\_ home: \_\_\_\_\_

cell: \_\_\_\_\_ Email: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_

**Boat information – please fill in all blanks**

Name: \_\_\_\_\_ State Reg. Number \_\_\_\_\_

Make: \_\_\_\_\_ Year: \_\_\_\_\_

Insurer: \_\_\_\_\_ Policy Number \_\_\_\_\_

Will you require Electric: \_\_\_\_\_ (\$150 charge)

LOA (length overall of boat) \_\_\_\_\_ ft X \$85/ft = \_\_\_\_\_

Plus Town Permit Fee \$ 150

Plus Electric

Total Cost of Slip \_\_\_\_\_

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I have read the 2009 Rules and Conditions (to be posted on website or mailed upon request). I accept and agree to the terms and conditions of this contract.

Signature..... Date.....

Deposit/Payment enclosed: \_\_\_\_\_