

PLEASE RETURN THIS FORM TO A BOARD MEMBER or mail to:

CMI, 6140 Doffing Ave, Inver Grove, MN 55076

Shareholder or Renter Contact Information

Boat Owner:		Siip #:	
(first)	(last)		
Mobile Phone Number: ()	Work Phone Number: ()	
Email Address:			
Contact #2:			
(first)	(last)		
Mobile Phone Number: ()	Work Phone Number: ()	
E. TAU			
Email Address:			
Address:			
(street)	(city)	(state)	(zip)
]	Boat Information		
·			
Make of Boat:	Name of Boat:		
T CD (D (D ') (' M		
Type of Boat:	Boat Registration No:		
Type of trailer:	License plate #:		
Make of Boat:	Name of Boat:		
Make of Bour.			
Type of Boat:	Boat Registration No:		
Type of trailer:	License plate #:		
Type of trailer.	License plate #.		
Summer trailer storage:	Winter boat storage:		
Annual slippage:	Winter live aboard:	(yes/no)	
Will you have a small boat in the same slip or	on the head nier?		
jou nuto a sinair cout in the same stip of	on the new pier.		

Boat Insurance information

Company name:	Policy #:			
Agents name:	Phone #:			
Vehicle Information				
Vehicle 1:	License plate #:			
Vehicle 1: (make, model, color)	<u> </u>			
Vehicle 2:	License plate #:			
Vehicle 2: (make, model, color)	<u> </u>			
T	4 T. C.			
Emergency Cont	act Information			
Name:	Relationship:			
(first) (last)				
Mobile Phone Number: ()	Work Phone Number: ()			
Email Address:				
Other 1	<u>Information</u>			
Pet name(s):	Breed:			
Tet nume(s).	Diccu.			
Garage:	Storage unit:			
(number)	(number)			
Are you a live a board?	Do you require propane hookup?			
(yes/no)	(yes/no)			
Will you require winter water?	Will you require winter pump-out?			
Will you require winter water? (yes/no)	(yes/no)			
Is your clim available for ment?				
Is your slip available for rent? **All renters must complete this form along with other required doc	uments as stated in the Castaway's Marina Operating Rules.			
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Is your slip for sale?				
is your stip for suic.				

Please contact a board member for assistance with sales and rental procedures