Summer Transient Dockage Reservation Form Saquatucket Municipal Marina 715 Main Street PO Box 207

Harwich Port, MA 02646

508-430-7532

FAX 508-430-7535

e-mail: mmorris@town.harwich.ma.us

Name:						
Mailing Address:	City/State/Zip:					
Phone Number(s):	(Cell)		L.O.A. (w/ pulp	oit):	Beam:	Draft:
Boat Name:	Make:			Doc #/	oc #/Registration #	
Do you need shore power? *ELECTRICAL NOTE: In most situation		- `	\$8.00/night)* volt twist locking marin		• `	00/night)*
Reservations can be requeste maximum stay of two week		•	0			•
ARRIVAL DATE:		_	DEPARTURE	E DATI	Ξ:	
A one-third deposit is required to confirm rate for the dates of your stay. (Rates are su prohibited in the marina lot). Calculate you	ibject to change v	without notice)				
	Boats Over 3:	<u>5' LOA</u>				
June 1	l - September 1	15 : \$3.20/ ft/	night			
\$3.20 X X X	X > # Nights	X 1/3 = \$	Deposit			
	Boats up to 35	5' LOA				
June 1	l - September 1	15 : \$2.30/ ft/	night			
\$2.30 X X X	X X X X	X 1/3 = \$	Deposit			
CHECK-IN TIME is between 1 p.m. and 5 p.m. CHI charge. Cancellations prior to two weeks of arrival day's dockage plus charge. Cancellations after 5 p.m.	ate will receive a 100	0%. Cancellations	within two weeks but	before 5 p	.m. on the day prece	ding arrival will forfeit one
A convenie	nce fee of 2.95%	6 will be applie	ed to all credit car	d transa	ctions.	
CREDIT CARD DEPOSITS TOTAL DEP	OSIT AMOUNT	Γ \$				
CREDIT CARD #:			Security (Code:		
Expiratione-mail Add	dress:					
The issuer of the card identified on this form is auti (together with any other charges due thereon) subject						omise to pay such TOTAL
Signature:Either mail in this form with deposit check in	Dat	te: the Town of H	arwich, e-mail or (because	e we do not have	a secure website) fax

this form signed with credit card information and we will debit you're your card for the amount you have acknowledged. A receipt will be sent

by return mail or e-mail (if provided) to you for your records.