

MARINA WEST YACHT CLUB

CRUISE IN CLUB AGREEMENT

Agreement Date: _____ Cruise in date: _____

Club Name: _____

Mailing Address: _____

City, State, Zip: _____

Contact Person: _____

Contact Phone and Email Address: _____

Amount of Deposit: * \$100.00

No docking fees are charged to reciprocal member clubs of PICYA, for others there is a charge of \$10 per night per boat.

Visiting Club Acceptance: _____

Name	Title	Date
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MWYC Acceptance: By: _____

Name	Title	Date
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MWYC Contact: **Norm Calloway, 13801 E Tokay Colony Road Lodi, CA 95240**

209-931-2844

A copy of the MWYC Rules and Regulations may be downloaded for your information. Please insure that each person on your cruise in is informed of these regulations. Thank you for your cooperation.

*Deposit is due with the return of this agreement and will be applied to you cruise-in charges. Deposit refund is available if cancellation is received more than sixty (60) days prior to the scheduled cruise in date. **Confirmation of the number of people and boats must be made seven (7) days prior to the scheduled cruise in date. You will be responsible for the cost of reserved meals.**

(Marina West Use Only)

Marina West YC Board of Directors approval date: _____

Confirmation Date: _____ Number of People: _____ Number of Boats: _____