

CITY OF LACON MARINA
Boater Information – 2008

Boat Name: _____

Manufacturer and Size: _____

Captain: _____

First Mate: _____

Home Address:

| | | | |
|--|------|-------|----------|
| | City | State | Zip Code |
|--|------|-------|----------|

Phone: _____ Cell Phone: _____

Place of employment & Phone:

Notify in Case of Emergency:

Please complete and return to Lacon City Hall

Lacon Marina is not responsible for damage caused by vandalism or accidents unless caused by them in relation to operations associated with the marina. Each owner(s) must provide proof of insurance at time of rental.

For Office Use Only:

Slip # _____ **Amount Paid:** _____ **Date:** _____ **Balance Due:** _____