

Please print this page and mail completed form to the Dockmaster.

## RIVER'S BEND MARINA BOAT SLIP/TRAILER SLOT APPLICATION

NAME: \_\_\_\_\_

RIVERS BEND ADDRESS: \_\_\_\_\_

\_\_\_\_\_

MAILING ADDRESS (if different from above), PHONE NUMBER AND EMAIL ADDRESS:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

LENGTH OF BOAT: POWER: \_\_\_\_\_ SAIL: \_\_\_\_\_ KAYAK: \_\_\_\_\_ CANOE: \_\_\_\_\_

BOAT- MAKE: \_\_\_\_\_ LENGTH: \_\_\_\_\_ DRAFT: \_\_\_\_\_ ENGINE: \_\_\_\_\_

REGISTRATION #: \_\_\_\_\_ EXP. DATE: \_\_\_\_\_

TRAILER- MAKE: \_\_\_\_\_ LENGTH: \_\_\_\_\_ LIC # & EXP. DATE: \_\_\_\_\_

INSURANCE COMPANY: \_\_\_\_\_ POLICY #: \_\_\_\_\_

(Insurance only required for vessels with an engine.)

SLIP PREFERENCE (List first to third choice, include all slips.): \_\_\_\_\_

The undersigned acknowledges that he/she has read the Marina Regulations posted on [riversbendhomeowners.com](http://riversbendhomeowners.com), and agrees to comply with all Marina Regulations as a condition to using the Marina, and to hold harmless and indemnify Rivers Bend Association, Inc., for any damages it incurs as a result of his/her use of the Marina.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

By March 1<sup>st</sup> of each year, mail completed application, insurance certificate for motorized vessels, and check payable to "Rivers Bend Association" for applicable fee to: Rivers Bend Dock Master, PO Box 605, Heathsville, VA 22473.

**Fees: Marina Slip \$100    Trailer: \$50    Kayak Rack Slip: \$25**

**Contact Dock Master after March 15** for your slip or trailer slot assignment.