CUCTOMED INFORMATION					
	CUSTOMER INFORMATION				
Last Name:	Cell Phone:				
First Name:	Home Phone:				
Middle Initial:	Work Phone:				
Email Address:					
May we add you to our email/	newsletter distribution list?				
,					
ADDRESS					
Address 1:					
Address 2:					
City:	State:				
Postal Code:	Country:				
VESSEL INFORMATION					
Yacht Name:	Year:				
Power/Sail:	Hull/Sail #:				
Builder:	Beam:				
Color:	Length:				
Hailing Port:	Draft:				
Registration/Document #:	Roller Furling?				
# of Masts:	Gas or Diesel?				
Eng. Make/Model:	Hot Water Heater?				
Pressure Water System? Gas/Diesel Generator?	Cradle Y/N: # of Jackstands				
Bottom Paint Brand/Color:	Power Requirements:				
Combination/Key:	Heat/Air Conditioning?				
Combination//tey.	ricationing.				
la this a shorter heat?	Name of Duninger				
Is this a charter boat?	Name of Business:				
OTHER INFORMATION					
Nickname:					
Spouse's/Partner's Name:					
Spouse's/Partner's Phone:					
Spouse's/Partner's Email:					
Children's Names:					
Pet's Names/Species:					

FOR OFFICE USE ONLY

Date added to database:		Storage/Dockage:	
		Slip#:	