

Green Bay Yachting Club

P.O. Box 485, Green Bay, WI 54305 (Mail) 100 Bay Beach Road, Green Bay, WI 54302 Telephone 920-432-0168

2024 Harbor/Lift Use Form

Please fill in form and turn in to Fleet Captain / Gas Attendant / Bartender

Date						
Name Membership Nr						
Address (if non-men	nber)					
,	Street		City		State	Zip
Reciprocal Yacht Cl	ub (if applica	ble)				
hone Numbers Home W		Work	ork Mo		ile	
		Boat	Name			
· ·	wer, Sail)					
Boat Length	Width	Manufacture	er			
Dock Number if Ass		N	Number of Nights			
Gate Card Number		Date In:		Date	Out:	
Amount Paid \$ Emergency Lift Reason for Lift	(Requires I	Full Membership)				
Location on grounds	s (if carried to	o jack stands)				
Emergency Lift *, * Non-Emergency Li Maintenance Lift *, Pressure Wash S * These services are ** Includes initial lift-ir *** As determined by	ft *, *** \$3.0 *** \$50.00 \$5.00 + tax available only n af a newly p	0 per linear ft. + ta + tax for each lift (with Full Members urchased boat or life	ax (2 hou engine/ot hip	rs maximum ii ther & 2 hours	n slings)	-
Non-Members:	Pay Dock A	Attendant or Bar	tender			
Members:	Pay Dock A	Attendant or Barl	ender o	ſ		
	Invoice Me					
Payment - 🛛 Ca	ash 🛛 Che	eck 🛛 Visa 🛙] м/с	Amount Pa	aid \$	
CC #						
Member Signature						
Approved by Fleet C	aptain			Date		

Only valid with Fleet Captain Approval