

## 2018 SOUTH HAVEN MUNICIPAL MARINA RENDEZVOUS RESERVATION INFORMATION FORM

<b>RENDEZVOUS NAME</b>	St. Joseph River Yacht Club Rendezvous		
<b>DATES OF ATTENDANCE</b>	August 3, 4, 5, 2018		
<b>ORGANIZER'S NAME</b>	Bruce Larson		
<b>ORGANIZER'S CONTACT INFO</b>	<b>PHONE:</b> (269) 266-2834	<b>EMAIL:</b> larsonbruce@comcast.net	
<b>DIRECTIONS</b>	<p>Give each member of your rendezvous group this form to fill out with their individual information and have them return it via email to this address: <a href="mailto:shmarina@south-haven.com">shmarina@south-haven.com</a></p> <p>This form requests payment information such as credit card numbers, etc. If a boater doesn't want to have that information sent via email, have them put their telephone number in that space so we can call and get their payment information over the phone.</p>		

Boater Information		Vessel Information			
<b>NAME</b>		<b>NAME</b>			
<b>ADDRESS</b>		<b>REGISTRATION NUMBER</b>			
<b>CELL PHONE</b>		<b>LENGTH OVERALL (tip to tip)</b>		<b>Power Or Sail (P/S)</b>	
<b>EMAIL</b>		<b>BEAM</b>		<b>DRAFT</b>	
<b>DOCKING PREFERENCES, IF ANY: (Not guaranteed, but we'll make our best effort to accommodate)</b>					

Payment Information				
<b>CREDIT CARD NUMBER (VISA or MasterCard)</b>				
<b>EXPIRATION DATE</b>	<b>MONTH</b>		<b>YEAR</b>	
<b>3 DIGIT SECURITY CODE (ON THE BACK)</b>				
<b>WRITE YOUR TELEPHONE NUMBER FOR PAYMENT INFORMATION TO BE TAKEN OVER TELEPHONE →</b>				