



DEL REY YACHT CLUB

SLIP PRIORITY REQUEST

Member: _____ Membership #: _____ Date: _____

Boat Name: _____ Class/Design: _____

Class/Design: _____ Power Sail

CF or Doc No: _____ LOA* _____ Beam: _____

*YOUR BOAT LENGTH CANNOT EXCEED THE SLIP LENGTH BY MORE THAN 4 FEET. THE LOA IS THE OVERALL BOAT LENGTH AND IS MEASURED FROM THE END OF THE BOW PULPIT TO THE END OF THE SWIM STEP AND/OR DAVITS. THE OVERALL LENGTH MUST BE EQUAL TO OR GREATER THAN 90% OF THE SLIP LENGTH.

<u>Telephone Numbers</u>	
Res:	_____
Bus:	_____
Boat:	_____
Fax:	_____
Cell:	_____

Pick ONE and ONLY ONE category from the following list			
✓	Category Number	Category Size	Deposit**
	1	Up to 30'	\$210
	2	35' – 37'	\$259
	3	40' – 45'	\$315
	4	46' – 50'	\$350
	5	54' – 57'	\$399
	6	60' – 68'	\$476
	7	78'	\$546
	8	80' & up	\$560

****A DEPOSIT CHECK MUST ACCOMPANY THIS REQUEST**

“All deposits shall be non-refundable, except in the event a membership is terminated prior to the assignment of a slip or a membership class is changed to a class not allowed to have slips.”

Please complete the following:

Do you have a partner in your boat? No Yes _____
Partner's Name Membership #

- 1. I am interested in any slip in the above category that becomes available. Please contact me at once when a slip in that category becomes available.
- 2. I am interested in only the following slip(s) if it (they) become available. Please list my dock/slip number or description.
- 3. There is no need to call me each time a slip becomes available

MEMBER'S SIGNATURE: _____

FOR OFFICE USE ONLY

Port Captain Confirmation: _____

Date/Time Received in Office: _____

Entered into Computer by: _____

Date Entered: _____

Date Sent to Accounting: _____