

(signature of boat owner)

## OYSTER COVE MARINA

P.O. Box 15 Kettering Tasmania 7155 • ph: 03 6267 4418 • fax: 03 6267 4349 • ABN: 18 667 240 489 email: <a href="mailto:admin@oystercovemarina.com.au">admin@oystercovemarina.com.au</a> • website: <a href="mailto:www.oystercovemarina.com.au">www.oystercovemarina.com.au</a>

## **MARINA BOOKING AND AGREEMENT FORM**

MARINA OPERATOR: Oyster Cove Marina of 7 Ferry Rd Kettering, Tasmania, 7155

Name:			
Address:			P/Code
Mobile No:	Home No	Home No:	
EMAIL ADDRESS: PLEASE INC	LUDE <b>EMAIL</b> ADDRESS AS THIS	IS PREFERRED MET	HOD OF COMMUNICATION
BOAT DETAILS:			
Boat Name:	Make & Model:		
Hull construction:	Overall length:	Beam:	Draught:
BERTHING REQUIREME	NTS:		
Commencement Date:			
_ength of stay: Permanent o	or from	to	
PLEASE NOTE: WE ARE CURRE	NTLY NOT ACCEPTING LIVEABO	ARDS IN THE MARIN	IA
INSURANCE DETAILS: pl	ease attach a copy of certificate of	currency for Insurance	)
Name of Insurer:	Policy No:	Due da	ate:/
Amount of Public Liability: \$			
We have read the Terms and Cond	ditions of the Berthing Agreement a	ttached and agree to t	he conditions detailed there
(signature of boat owner)		(date)	

(date)