

**COMMERCIAL SLIP WAITING LIST APPLICATION**



Sandwich Marina  
 12 Freezer Road  
 PO Box 1393  
 Sandwich, MA 02563

Shaded areas to be fill out by Harbormaster office only.

Original Application Date/Time

Please select the appropriate.

New Application	<input type="checkbox"/>
Annual Renewal	<input type="checkbox"/>

Name:	Cell Phone:
<b>Home Address Street, City, State, Zip Code</b>	<b>Home Phone</b>
<b>Email Address (Required)</b>	<b>Mobile Phone</b>
<b>Secondary Contact (other than numbers given above)</b>	<b>Contact Number</b>

<i>Full Slip Categories. Check One Only</i>	
24 foot and less	<input type="checkbox"/>
25 to 30 foot	<input type="checkbox"/>
31 to 40 foot	<input type="checkbox"/>
41 to 50 foot	<input type="checkbox"/>
51 foot and over	<input type="checkbox"/>

**NOTES**

1. Please initial or place "X" in the box to indicating appropriate Wait List Category you desire to be included to.

**Please Note:** It is the applicant's responsibility to notify the Marina Office of any changes (i.e. mailing address, phone number, email address, etc), failure to do so may result in non receipt of the annual notice for renewal. The Marina is not liable for lost mail and it is the applicant's responsibility to contact the Marina if they have not received the annual renewal by March 1. Failure to respond/submit payment to the annual renewal will result in removal from the WAITLIST. No appeals will be granted upon removal. **RETURNED CHECKS WILL BE CHARGED**

I hereby request my name to be added to the Sandwich Marina Recreational WAITLIST as stated above. I understand that slips will be offered on the basis of the application date in which this document was received by the Marina office personnel. Slips will be assigned at the discretion of the Harbormaster and the appropriate wait date. I further agree to abide by the rules and regulations of the Sandwich Marina once awarded a

Date: \_\_\_\_\_ Applicant's Signature: \_\_\_\_\_  
 Date: \_\_\_\_\_ Authorized Signature: \_\_\_\_\_

<b><u>ATTENTION RENEWAL APPLICANTS: ONLY SIGN IN THIS AREA IF YOU CHOOSE TO BE REMOVED FROM THE WAITLIST.</u></b>	
<i>By signing here you are in full understanding you will be removed from the waitlist.</i>	
Date: _____	Applicant's Signature: _____