

# LA CROSSE MUNICIPAL BOAT HARBOR

1500 Joseph Houska Park Dr 400 La Crosse Street (Mailing) La Crosse, Wisconsin 54601 [www.cityoflacrosse.org/parks](http://www.cityoflacrosse.org/parks)

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## Transient Multiple-Slip Facility Agreement

Vessel Owner(s): \_\_\_\_\_ Boat Name: \_\_\_\_\_  
Address: \_\_\_\_\_ Email Address: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_  
Vessel Make: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
Insurance Carrier: \_\_\_\_\_ Vessel Width & Length: \_\_\_\_\_  
Insurance Policy #: \_\_\_\_\_ DNR Registration #: \_\_\_\_\_  
State of Registration: \_\_\_\_\_

Vessel Is Owned By (Circle): Individual Partnership Corporation

Agreement Start Date: May 1, 2018 Agreement End Date: October 31, 2018

See Schedule For Slip Fee Structure
Non-residents Charged An Additional 10%
Includes Electricity As Stated In TERMS AND CONDITIONS/RULES

Agreement Amount Due: \_\_\_\_\_  
Deposit (Min. \$250.00): \_\_\_\_\_  
Balance (Due April 1, 2018): \_\_\_\_\_

I agree to be bound by the foregoing Transient Multiple-Slip Agreement. I also acknowledge receipt and agree to be bound by the Fee Schedule, Terms and Conditions/Rules, and Environmental Policies in effect on the date hereof. I have acknowledged insurance on my vessel is current, agree to keep it in force for the duration of this agreement, and have included a copy with this agreement.

Vessel Owner: \_\_\_\_\_ Date: \_\_\_\_\_

Office Use Only			
Date Received:		Initial:	