

120 Clinton Street

400 La Crosse Street (Mailing)

La Crosse, Wisconsin 54601

www.cityoflacrosse.org/parks

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SLIP AGREEMENT									
Vessel Ov	wners:				Boat Name:				
					Email Address:				
Ad	dress:				City/State/Zip:				
Home P					Office Phone:				
Vessel I	Make:				Vessel Length:				
Insurance Ca	surance Carrier:			DN	R Registration #:				
Insurance Po				of Registration:					
	Tenant (If Not Vessel Owner):								
		Vessel Is Owned	d By (Circle):	Individual	Partnership	Corporation			
Slip Nu	mber:				Dock (Circle)	Α	В	С	D
Lease Start	Date:	April 15,	2019		Lease End Date:	00	ctober	15, 20	19
\$550 for a 20' x 10' slip (Non-residents charged an additional 10% for slip size)									
\$650 for a 20' x 12.5' slip (Non-residents charged an additional 10% for slip size)									
\$850 for a 20' end slip (Non-residents charged an additional 10% for slip size)									
\$30 per foot that the water vessel exceeds 20' in length (Non-residents charged an additional 10% for slip size)									
Agreement Amount (Plus Applicable									
Taxes):  Deposit (Min. \$250.00):									
Balance (Due March 30, 2019):									
I agree to be bound by the foregoing Slip Agreement. I also acknowledge receipt and agree to be bound by the above slip fees, Terms and Conditions/Rules, and Environmental Policies in effect on the date hereof.									
above	e slip fee	es, Terms and Cond	litions/Rules	s, and Enviro	onmental Policie	s in effect on	the da	ite he	reot.
Vessel Owner:						Date:			
Г									٦
	Office Use Only								
		Date Received:			Initial:				

