**Macassa Bay Yacht Club Visitor Registration Form & Waiver**

(Please print information)

Name of Owner/Captain \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Your email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency Contact Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell Number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Make of Vessel \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Vessel Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Sail ⬜ Power ⬜ LOA \_\_\_\_\_\_\_\_\_ft Beam \_\_\_\_\_\_\_\_\_\_ft Draft\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ft

Total number of crew onboard including owner \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Yacht Club \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Last Port \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Next Port \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Arrival Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Departure Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I certify that my vessel insurance is valid and current and I am carrying Vessel Liability Insurance ⬜ Yes ⬜ No

The undersigned agrees that the assigned dock space shall be used at his/her own risk and that Macassa Bay Yacht Club shall not be responsible or liable in any way for the care, protection, loss or damage of whatever kind or nature to the occupying boat, crew, motor, gear equipment or contents however occasioned.

The undersigned further agrees not to leave the vessel unattended during this visit for a period greater than eight (8) hours unless other arrangements have been made with the Dock Master or designate and confirms the Covid 19 questions below:

COVID Safety Check (to the best of my knowledge)

⬜ I do not have any symptoms of Covid-19

⬜ I am not waiting for any test results of Covid-19

⬜ I have not been in direct contact with anyone that has or is suspected to have Covid-19 in the last

five days

Key fob required for gate/washrooms/clubhouse access and will be provided to you. If key fob not returned you will be responsible for a $25 administrative fee.

A valid membership card was shown ⬜

Signature of Owner/Captain \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_