

BELLE MAER HARBOR

41700 CONGER BAY DRIVE, HARRISON TWP, MI 48045 (586)465-4534 Fax: (586)465-6956

TRANSIENT RESERVATION FORM

ARRIVAL DATE: ___/___/___ DEPARTURE DATE: ___/___/___ WELL REQUESTED: _____

NAME: _____

ADDRESS: _____ CITY, ST _____ ZIP _____

PHONE: (CELL) _____ (WORK) _____ (HOME) _____

EMAIL ADDRESS: _____

BOAT YEAR/MAKE/MODEL: _____

REGISTRATION (MC) # _____ NUMBER OF PEOPLE ABOARD: _____

OVERALL LENGTH: _____ BEAM: _____ DRAFT: _____

BMH BOATER MAKING REFERRAL: _____

CHARGE PER DAY: \$ _____ FOR _____ DAYS TOTAL: \$ _____

PAYMENT METHOD: CASH _____ CHECK _____ CREDIT CARD _____

WELL ASSIGNED: _____ DATE: _____

NO CANCELLATION REFUNDS

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As a condition of transient dockage at Belle Maer Harbor ("Marina"), the transient boater must comply with the Marina General Rules, Environmental Rules, Security Rules, and Swimming Pool Rules as published by the Marina. Copies of these rules are available on the Marina website or from the Marina office. Failure to comply with these rules may result in eviction from the Marina. No refund once reservation is made and payment processed.
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BELLE MAER HARBOR CREDIT CARD AUTHORIZATION FORM

- VISA
- MASTERCARD
- DISCOVER

AMOUNT: \$ _____

Printed Name on Card: _____

Card Billing Address (if different than address on BMH Application/Agreement):

Street address: _____

City: _____ State: _____ Zip: _____

ACCT. #: _____ Exp.: _____ 3-digit code: _____

I authorize Belle Maer Harbor to charge my credit card in the amount of listed above.

Signature: _____ Date: _____