

MOORING RESERVATION REQUEST FORM

City of Omro P.O. Box 399 205 S. Webster Avenue Omro, WI 54963 (920) 685-7000

Miller Harbor (Miller Site Requested	: Park		1 F	2	3	4						10 (-14 D:1-)
`	r Park		r	\boldsymbol{C}	TT							10 (electric only – River side)
`	Park		_									- Lagoon side)
Site Requested		:)	1	2	3	4	5	6	7	8	9	10 (no electric/water)
Date of Arrival:						D	ate o	f De	par	ture	:	
Time of Arrival:			_am/p	m		Ti	ime (of D	epar	ture	:	am/pm
Name of Boat:												
Registration No.												
Length of Boat:					Ty	pe o	f Cr	aft:				
Name of Owner:												
Address:												
Telephone Number:	(_)						Hon Oth	ie er			
Number On Board:				_Gr	oup/	Boa	t Clı	ıb A	ffilia	atior	ı: _	
Dogs on Board:	Yes o	r No	0	Bre	eed o	of A	nima	l(s)				
Number of Nights: _		X	Moo	ring	g Fee	of S	520. 0	0 ре	r ni	ght ((elec	etrical) = \$
Number of Nights: _		X	Moo	ring	g Fee	of S	510. 0	0 pe	r ni	ght ((no	electrical) = \$
business days of the reserv	ved dat ed with	e. This	signed s or mo	appl ney o	licatio orders	on fo s ma	rm co de pa	nstit yable	utes : to: (a con	trac	with this signed form, within two (2) t. The applicable fees and the signed nro, and addressed to: Boat Mooring

DATE:

SIGNATURE OF REQUESTER:_