
BOAT OWNER VACATION FORM

City of Grosse Pointe Farms
Department of Parks and Recreation
Pier Park

Boat Owner's Name _____ Date _____
Address _____ Well Number _____
Phone Number ≈ Home _____ Work _____
Boat Description _____ MC- _____
Length of Vacation ≈ To (Day & Date) _____ From (Day & Date) _____

CONTACT INFORMATION

Emergency Contact's Name _____
Address _____
Phone Numbers ≈ Home _____ Cell _____
Work _____ Pager _____
Comments or Special Requests _____

Boat Owner's Signature _____
Park Supervisor's Signature _____
