



Date: _____
Prepared By: _____

VISITING CLUB EVENT WORKSHEET

YACHT CLUB INFO

<u>Visiting Yacht Club:</u>	<u>Club Phone:</u>
<u>Contact Person:</u>	<u>Contact Phone#:</u>
<u>Email:</u>	<u>Fax#:</u>

VISITING DATE (S)

<u>From:</u>	<u>To:</u>	<u>ETA:</u>
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BOATS/SLIPS

<u># OF BOATS:</u>	<u>SLIPS:</u>	<u>RESERVED BY:</u>		
BOAT NAME		TYPE	SIZE	SLIP

GALLEY

DINNER AT CLUB: YES NO	# OF PERSONS:
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MISC. COMMENTS

COPY TO PORT CAPTAIN, GALLEY COMMITTEE, BRIDGE & MICHELLE