CLUB NÁUTICO DE SAN JUAN

PO Box 9021133
San Juan, PR 00902-1133

Slip Reservation Form

Vessel's Arrival Date and Time_____ **Boat Name**_____

Departure Date_____ **Destination**_____

Registration No._____ **Captain**_____

Owner's Name_____

Address_____

City_____**State**_____**Zip**_____**Tel:**_____

Power_____ **Sail**_____ **Length**_____ **Beam**_____ **Draft**_____