



CAPE CROSSING
MARINA

Hurricane Slip License



Valid for Year _____

HURRICANE SLIP ASSIGNED: _____

Name: _____ Phone: _____

Street: _____ City: _____ State: _____ Zip: _____

Email: _____ Contact: _____

Boat Name: _____ Size: _____ x _____ x _____

Insured: _____ Registered: _____ Copy of Drivers License: _____

Credit Card Information:

Name on Card: _____

Card Number: _____ Exp: _____ CVV _____

HURRICANE SLIP FEE: _____

Wavier of Liability and Payment Guarantee:

I, _____ authorize **Cape Crossing Resort and Marina** to charge my card for this Transient Slip License . I understand that this payment is for my slip license for the year specified above. I further acknowledge and agree that the hurricane slip license allows my vessel to be tied in a lane inside the marina NOT in a slip on the docks and meets my satisfaction. I must assume all liability from failure of the docks and slips, etc. during storm conditions. I understand that the Marina docks, lanes and seawall are not guaranteed safe locations for vessels during tropical storms or hurricanes, and the Marina believes significant damage to vessels and to the Marina will likely occur in a major storm if a vessel remains in the Marina. I further agree to the Hurricane Policy of the Marina and that it is my sole responsibility to be aware of the threat or approach of a tropical storm or hurricane and will accept ALL liability and responsibility for myself, family and guests, vessel and property, while using the facilities, docks, etc.. I WILL NOT in anyway hold Cape Crossing Marina responsible for any and all things that may or could happen during this stay. I agree that any damage I or my party or vessel may be involved or cause will be at my expense and hold Cape Crossing Marina and their staff harmless in totality.

I WILL HAVE MY VESSEL IN THE HURRICANE SLIP AT THE DESIGNATED TIME AND DATE ACCORDING TO THE MARINA MANAGER. I WILL HAVE MY VESSEL REMOVED FROM THE MARINA WITHIN 72 HOURS AFTER A STORM UNLESS OTHER ARRANGEMENTS ARE MADE WITH THE MARINA. MY VESSEL WILL BE VACATED AS PER REQUIRED DURING A MANDATORY EVACUATION ORDER.

Slip Licensee: **X** _____

Marina Staff: _____ (witness)