



**Cabrillo Beach Yacht Club**  
 211 West 22<sup>nd</sup> Street, San Pedro, CA 90731

Office : 310.519.1694  
 Fax: 310.519.1526  
[office@cbyc.org](mailto:office@cbyc.org)

If you or your club is planning on visiting / cruising to CBYC you may use this form to request a slip reservation(s). Complete all information and email / fax / mail form to the club. Along with this page, please complete the Visiting Vessel Registration Form (pg. 2), provide a copy of your vessel registration or documentation, current insurance policy, driver's license and reciprocating yacht club membership card for each boat. Please call to confirm your reservation 48 hours prior to your arrival date.

**PLEASE PROVIDE ALL INFORMATION**

Your Name: \_\_\_\_\_ Title (if applicable): \_\_\_\_\_

Email: \_\_\_\_\_ Mobile Ph: \_\_\_\_\_ Phone: \_\_\_\_\_

Yacht Club: \_\_\_\_\_

Club Email: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Arrival Date: \_\_\_\_\_ Departure Date: \_\_\_\_\_

How many boats will be arriving: \_\_\_\_\_ ( please list all boats – use additional pages if necessary)

	<b>BOAT NAME</b>	<b>SKIPPER NAME</b>	<b>BOAT TYPE (P/S) – LENGTH / BEAM / DRAFT</b>
1	_____	_____	_____
2	_____	_____	_____
3	_____	_____	_____
4	_____	_____	_____
5	_____	_____	_____
6	_____	_____	_____
7	_____	_____	_____
8	_____	_____	_____
9	_____	_____	_____
10	_____	_____	_____

Special requests or requirements: \_\_\_\_\_

*Continued*



# Cabrillo Beach Yacht Club

Visiting Vessel Registration Form

Office : 310.519.1694  
 Fax: 310.519.1526  
[office@cbyc.org](mailto:office@cbyc.org)

Vessel Name \_\_\_\_\_ CF# \_\_\_\_\_ Size \_\_\_\_\_ P/S \_\_\_\_\_

Insurance Co. \_\_\_\_\_ Policy # \_\_\_\_\_ Exp. Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Owner's Name \_\_\_\_\_ Yacht Club \_\_\_\_\_

Address \_\_\_\_\_ City/State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phones: Mobile \_\_\_\_\_ Business \_\_\_\_\_ Home \_\_\_\_\_

Email: \_\_\_\_\_ Credit Card # \_\_\_\_\_ Exp. Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**You are hereby authorized to charge my credit card for the associated slip reservation fees.**

\_\_\_\_\_  
 Signature

\_\_\_\_\_  
 Date

**IMPORTANT – PLEASE SEE COMPLETE GUIDELINES FOR VISITING YACHTSMEN**

- CBYC requires all visiting vessels to have current registration or documentation and current liability insurance. The owners of the visiting vessel must also be a current member of a bona fide yacht club or sailing association granted reciprocal privileges by CBYC.
- Slip fees are \$1.00 / ft. per night, with a \$25/night minimum. Maximum stay is seven days, based on slip availability.
- No maintenance of any kind, except wash downs, is allowed on visiting vessels. No visitor may violate the Clean Water Act or any local, state, or federal laws.
- Keycards are available at the front desk with a \$50.00 refundable deposit.
- All visiting vessels must display their yacht club burgee at all times. You and your guests are expected to follow common Corinthian courtesies and the CBYC club rules while in the club.
- Copies of your membership card, driver's license, vessel documentation and insurance policy will be kept on file at the CBYC office.
- All guests of visiting vessels must be properly registered with the Club during the vessel's stay. Please contact the office if you are expecting guests.

**PLEASE INCLUDE A COPY OF ALL REQUIRED DOCUMENTATION FOR EACH VISITING VESSEL**

**FOR OFFICE USE ONLY**

No. Paid Nights	Paid Dates	Rate / Night	Total Paid	Date Paid	Initials	
Assigned Slip	Arrival Date	Departure Date	Comp Nights	Key Deposit	Guest Cards	Parking Pass