

Contact Information – Scott F. Parillo, Sr.	
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## SEASON PASS/DRY DOCK CONTRACT

Customer Information				
<b>Name</b>				
<b>E-Mail</b>				
<b>Street or P.O. Box</b>				
<b>City, Town, or Village</b>		<b>State</b>		<b>Zip</b>
<b>Phone Number(s)</b>	<b>Home</b> ( )	<b>Work</b> ( )	<b>Cell</b> ( )	

Boat Information	
<b>Year/Make</b>	
<b>Vehicle License Plate</b>	
<b>Trailer License Plate</b>	
<b>Registration Number</b>	State ____ Number _____
<b>Registration Number</b>	State ____ Number _____

**Please make applicable changes to this page and sign the back for return.**

