



Guest Dock Inquiry

Please fill out and return to:

Riverbank Marina
P.O. Box 340658,
Sacramento, CA 95834-0658
Telephone: (916) 922-0720 Fax: (916) 922-3410

Or fill out online at www.Riverbank.com

*Vessel Owner(s): _____

*Street Address: _____

*City, State, Zip Code: _____

*Preferred Phone: () _____

E-Mail Address: _____

Emergency Contact (Name & Phone #): _____

Would you like to receive news and information about Riverbank Marina? Yes No

*Arrival Date (check in time is 2PM): ____ / ____ / ____

*Departure Date (check out time is Noon): ____ / ____ / ____

Vessel Information

*CF/Doc#: _____

*Year/Make: _____

*Overall Length: _____

Name on vessel (if vessel is named): _____

*Color: _____

*AMP/ Power Needed: _____

*Indicates Required Information

I have read, fully understand and agree to abide by the Riverbank Marina Rules and Regulations and Guest Dock Terms and Conditions, all amendments thereto as provided.

Signature: _____ **Date:** _____