



*department of* Conservation and Recreation

**2017 APPLICATION FOR CHARLES RIVER BASIN MOORING**

**APPLICANT INFORMATION**

NAME (LAST, FIRST, INITIAL):

EMAIL:

ADDRESS

NO.

STREET

CITY/TOWN

STATE

ZIP

HOME TELEPHONE

CELL/ BUSINESS TELEPHONE

DATE OF BIRTH

**BOAT INFORMATION**

BOAT TYPE

MAKE

BOAT NAME

YEAR

REGISTRATION #

LENGTH

WEIGHT

**EMERGENCY CONTACT**

NAME

TELEPHONE #

RELATION

The DCR Park Ranger Marine Unit and local authorities are all active participants on the Massachusetts Waterfront Crime Watch Program. To assist us in the attempt to prevent waterfront crimes, please list all electronic devices and model numbers below:

Type of Electronic Device

Make

Model/Serial #S

PLEASE ATTACH A COPY OF YOUR CURRENT BOAT REGISTRATION

SIGNATURE: \_\_\_\_\_