

MILTON KEYNES MARINA

Change of Details Form

BOAT NAME

Old Details

OWNERS NAME

ADDRESS

.....POST CODE

TELEPHONE NO

E-MAIL ADDRESS

INSURANCE POLICY PROVIDER

INSURANCE POLICY NUMBER

BSS CERTIFICATE NUMBER

New Details

OWNERS NAME

ADDRESS

.....POST CODE

TELEPHONE NO

E-MAIL ADDRESS

INSURANCE POLICY PROVIDER

INSURANCE POLICY NUMBER

BSS CERTIFICATE NUMBER

I understand and agree to abide by the Company's General Conditions of Mooring.

SIGNED **DATE**