

Event Request Form

First Name

Last Name

Email Address

Phone Number

Company Name

Event Type

Estimated Number of Guests

Please give a full description of your event.

Will this be a sit-down event or a standing reception?

What date(s) are you interested in for your event?

What is the start and end time of your event?

Will you be using one of our recommended caterers or bringing your own?

Will you be serving alcohol at your event?

Parking is limited at the marina. How many vehicles are you estimating for this event?

Any additional questions or comments you have for us?

