NO OBLIGATION BOAT INSURANCE QUOTE FORM



Vagabundos Boat and Travel Club P.O. Box 549, Rio Vista, Ca 94571

Phone: 707-374-5511, Fax: 707-374-6843

Applicant:	Age:	Member #:	
Address:	_ Phone:		
City:	_State:	Zip:	
Proposed Effective Date:			
Type of boat: Ski \boxtimes Runabout \square Center Co	nsole 🗆 Cabir	n Cruiser □ Sail □]
Construction: Fiberglass \square Aluminum \square Wood \square Steel \square Other \square			
Power: I/O □ Outboard □ Inboard □ Gas	s □ Diesel □		
Number of Engines Total Horsepower _	Length _	Beam	Age
Manufacturer:	_Model Name	, Number or Style	e:
COVERAGES			
Market Value of hull, engine(s) and electron	nics: \$		
Deductible: 1% 2%(Values of less than \$25,000 have a \$250 minimum deductible)			
Value of Trailer: \$ (\$10	0 deductible)		
Personal Injury per Occurrence: Medical payments:			\$5,000
Personal Effects			\$1,000
Uninsured	Boaters:		\$25,000
Commerc	ial Towing and	assistance:	\$350
General Information			
Current Carrier:			_
Boating Education: Coast Guard Auxiliary	☐ Power Squad	Iron 🗌 Captain's Li	cense 🗆
Years as a boat owner: Any L	Losses: Yes	No □ (If yes, ple	ase explain)
		(Use separate she	et if necessary.)
Waters to be navigated are inland & coastal waters	s of U.S.A. & Car	nada. For other area	as, check \Box
appropriate box: Alaska \square Mexico \square (Other (specify)		
This is only a price request and in no way binds the Age	ent or Insuring Cor	mpany for any coverag	ge or losses.
Signature:	_	Date:	

Please note: This boat insurance does not provide Mexican liability coverage which is available from your club office.