



# HARBOR HOST APPLICATION

By Authority of Parts 741 and 831 of Act 451, P.A. 1994, as amended.

APPLICANT INFORMATION			
Applicant's Name		Retired <input type="checkbox"/> No <input type="checkbox"/> Yes	
Address, City, State, ZIP Code			
Telephone Number	Date of Birth	Driver License Number	
E-mail Address		T-Shirt Size	
CO-APPLICANT INFORMATION			
Co-Applicant's Name		Retired <input type="checkbox"/> No <input type="checkbox"/> Yes	
Address, City, State, ZIP Code			
Telephone Number	Date of Birth	Driver License Number	
E-mail Address		T-Shirt Size	
HOST INFORMATION			
List names of family members who will reside full time in the harbor on your vessel:			
Do you plan to stay on your vessel overnight? <input type="checkbox"/> No <input type="checkbox"/> Yes		If you plan to stay on your vessel overnight, how many nights per week?	
Will any pets reside with you? <input type="checkbox"/> No <input type="checkbox"/> Yes	If Yes, What Type of Pet: <input type="checkbox"/> Dogs <input type="checkbox"/> Cats <input type="checkbox"/> Other: _____		Total Number of Pets
Have you served as a Harbor Host before? <input type="checkbox"/> No <input type="checkbox"/> Yes	If Yes, Location:	Dates Served as Host	
Have you completed Harbor Host Training? <input type="checkbox"/> No <input type="checkbox"/> Yes	Is Yes, Date of Training		
What kind of vessel will you use? <input type="checkbox"/> Sailboat <input type="checkbox"/> Motor Boat <input type="checkbox"/> Fishing Boat			Length of Unit
List State Harbor and dates you would be available to serve as Harbor Host(s):			
State Harbor (First Choice)		Dates Available to Serve as Harbor Host(s)	
State Harbor (Second Choice)		Dates Available to Serve as Harbor Host(s)	
List any special interests and/or talents that can help you in carrying out your host duties.			
PERSONAL REFERENCES (LIST TWO)			
Name		Relationship	Telephone Number
Address, City, State, ZIP Code			
Name		Relationship	Telephone Number
Address, City, State, ZIP Code			
EMERGENCY CONTACT			
Person's name (not living with you) to be notified			Telephone Number

**CERTIFICATION**

**Please read the following conditions of employment and sign below:**

*I will reside during my agreement period as harbor host in the State Harbor to which I have been assigned.*

*I will stay at the facility for the convenience of the Department of Natural Resources, Parks and Recreation Division.*

*I will accept residence arrangements established by my assigned facility as a condition of my being accepted to perform volunteer services as a harbor host.*

*I understand that this agreement can be terminated at any time by either party in writing and that past volunteer status does not obligate the State of Michigan to place me as a Harbor Host in the future.*

*I understand that I may not be entitled to workers' compensation or liability protection.*

*I understand that all the information I have willfully provided on this application is required under the authority of the Michigan Department of Natural Resources for the safety and wellbeing of all persons who utilize public facilities and that this information will become public record. I understand that a criminal history check may be obtained prior to my appointment as a harbor host. I agree to perform the minimum required activities. I certify that this information is complete and true.*

*I agree to abide by Department Policy, State and Federal laws which prohibit discrimination in employment, education, housing, public accommodations, law enforcement or public service based on religion, race, color, national origin, age, sex, marital status, height, weight, or disability.*

*I certify that I have read, understand, and have signed the PR0511, Volunteer Release and Waiver of Liability.*

*I further certify that I have read, understand and agree to abide by the Harbor Host-Volunteer Program Policy#6.7.*

Applicant's Signature	Date
Co-Applicant's Signature	Date

**Please return completed application to:**

**State Harbor**

**(Michigan State Harbor(s) indicated as your first choice to serve as a volunteer Harbor Host)**

**OR**

**Volunteer Coordinator  
Parks and Recreation Division  
Michigan Department of Natural Resources  
P.O. Box 30257  
Lansing, MI 48909**

**DNR USE ONLY**

Criminal History Check Completed and Volunteer is Approved <input type="checkbox"/> No <input type="checkbox"/> Yes	Confirmed Dates of Assignments
DNR Supervisor's Signature	Date
Harbor Location	