



**Clarkes Court Boatyard & Marina Apartments**  
**Clarkes Court Bay Rd.**  
**Woodlands, St. George.**  
**Grenada W.I**  
**Phone: 473-439-3939 / Fax: 473-439-3940**  
**Email: [info@clarkescourtmarina.com](mailto:info@clarkescourtmarina.com)**

**FOR CCBM USE:** Apartment Name:..... No. of Nights .....

☐ Single Occupancy US\$95.00 per room Additional person per room US\$22\_\_\_\_  
☐ Double Occupancy US\$95.00 per room

Arrival Date: \_\_\_\_\_ Arrival Time: \_\_\_\_\_ Departure Date: \_\_\_\_\_

Full Name of each member of party:

1. \_\_\_\_\_ 4. \_\_\_\_\_  
2. \_\_\_\_\_ 5. \_\_\_\_\_  
3. \_\_\_\_\_ 6. \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State/Province \_\_\_\_\_ Country: \_\_\_\_\_

Email: \_\_\_\_\_

Tel (Home) \_\_\_\_\_

Tel (Mob) \_\_\_\_\_

Car Space required: YES / NO

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I ..... agree to the terms and Conditions of this booking and enclose US \$..... as a deposit (US\$95 per Apartment)

Method of Payment: ☐ Cash  
☐ Cheque  
☐ Credit Card

Card #: \_\_\_\_\_ Expiration Date: \_\_\_\_\_ Signature: \_\_\_\_\_

Check-In Time: 2:00 P.M

Check-out Time: 11:00 A.M