

Windward Passage
322 Aoloa Street Kailua, HI 96734
Phone: (808) 261-2443 Fax: (808) 262-1858
Email: wp-office@hawaii.rr.com

Bicycle, Surfboard or Kayak Registration

Name: _____ **Apartment #** _____

___ **Bicycle #1** **Make** _____ **#2 Make** _____
Model _____ **Model** _____
Color _____ **Color** _____

___ **Surfboard** **Description** _____

___ **Kayak** **Make** _____ **Model** _____

Bicycle Cage Slot Number # _____ **Rear Lot** _____ **Parking Stall** _____

Surfboard Rack Number # _____

Kayak Slot Number # _____

**A NONREFUNDABLE FEE IS REQUIRED TO STORE EACH BICYCLE,
SURFBOARD, OR KAYAK, PAYABLE FOR ANY PART OF THE CALENDAR YEAR**

Signature of Resident: _____ **Date:** _____

Resident Manager Signature: _____