



Please return form to:
Eric Cooper, Director of Alumni Relations
California State University Maritime Academy
200 Maritime Academy Drive
Vallejo, CA
Phone: 707-654-1299

Port Pass Discount Program Registration Form

Business Name: _____

Contact Name: _____ Position: _____

Address: _____ City: _____

Zip/Postal Code: _____ Phone: _____ Fax: _____

Email: _____ Website: _____

Retail/Services

- 20% total bill
- 15% total bill
- 10% total bill
- Other (min. 10%, please explain below)

___ Guest Limit

Other/Online Code:

Restaurants

- 20% food only (alcohol not discounted)
- 15% food only (alcohol not discounted)
- 10% food only (alcohol not discounted)
- Other (min. 10%, please explain below)

___ Guest Limit

I am interested in hearing more about the following opportunities:

- Cal Maritime Festival/Homecoming
- Day on the Bay
- Summer Send-Off
- On-campus programming
- Students looking for jobs, co-ops/internships
- Other

I understand that the only requirements for participating in the Port Pass Discount Program are to: 1) Display the Cal Maritime Pride sticker prominently at the Main Entrance of my business, and 2) Provide the agreed upon discount to anyone with a valid Cal Maritime Port Pass.

Contact Signature

Date

Eric Cooper, Director of Alumni Relations

Date