



## ICE RENTAL REQUEST FORM DUE JANUARY 15, 2012

**Instructions:** Please complete this form indicating the dates, times and facility you are requesting for the 2012-2013 ice season and/or new or differing hours for playoffs, tournaments, or special events. All ice/facility will be allocated according to the City of Owen Sound Ice Allocation Policy (copy available upon request). **The City reserves the right to reject application and requests from users who submit forms which are not complete or contain incorrect information.**

Return completed form to Community Services, c/o Brenda Dailey, 808 2<sup>nd</sup> Avenue East, Owen Sound, ON N4K 2H4, E-mail [bdailey@owensound.ca](mailto:bdailey@owensound.ca). Phone 519-376-4440 Ext 1254; Fax 519-376-6028.

**ICE RENTAL RATES:** (all rates are plus applicable taxes HST 13%)

TIME FRAME	2012		2013	
	MINOR	ADULT	MINOR	ADULT
Non-Prime (Mon-Fri 6:30am-4:30 pm)	\$96.03	\$120.05	\$98.91	\$123.65
Prime (Mon-Fri 4:30-12 pm & Sat & Sun)	\$120.65	\$168.16	\$123.65	\$173.20

<b>Organization/Individual:</b>				
Organization:		Website address:		
<b>1<sup>st</sup> Contact Person:</b>		Position:		
Address:		E-mail Address:		
Municipality:		Postal Code:		Province:
Telephone Number: (     )		Fax: (     )		Cell Number: (     )
<b>2<sup>nd</sup> Contact Person:</b>		Position:		
Address:		E-mail Address:		
Municipality:		Postal Code:		Province:
Telephone Number: (     )		Fax: (     )		Cell Number: (     )
<b>Insurance:</b>				
All users are required to provide proof of general liability insurance in the amount of \$2 million naming <b>“The City of Owen Sound”</b> as an additional named insured.				
Groups without insurance, occasional users and other users may purchase insurance through the City of Owen Sound to meet this requirement at the time of ice booking.				
<b>Signature:</b>				
<div style="display: flex; justify-content: space-between; align-items: center;"> <div style="width: 40%; border-top: 1px solid black; margin-bottom: 5px;"></div> <div style="width: 40%; border-top: 1px solid black; margin-bottom: 5px;"></div> </div> <div style="display: flex; justify-content: space-between; align-items: center;"> <span>Date</span> <span>Signature</span> </div>				
Office use only				
Received by:				
Date received:			Date completed:	

<b>Ice Requests:</b>			
	<b><i>Bayshore</i></b>	<b><i>Regional Recreation Centre Rink 1</i></b>	<b><i>Regional Recreation Centre Rink 2</i></b>
Preferred Day(s)	Preferred time slot (i.e. 9-10 a.m.)	Preferred time slot (i.e. 9-10 a.m.)	Preferred time slot (i.e. 9-10 a.m.)
Sunday			
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			
Saturday			
Total hrs. Requested			
<b>Anticipated start date:</b>		<b>Anticipated end date:</b>	
<b>Tournaments/Carnivals etc:</b>			
Date(s)	Number of Hours	Number of Ice pads required	
<b>Comments:</b>			