



Ice Rental Request

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| Renter Name: | Address |
| Phone #: | Email: |
| Group Type: | Returning Youth Minor Sport Organizations for total historical time or less. <input type="checkbox"/> Returning Recreational Users for total historical time or less. <input type="checkbox"/> New Youth Minor Sport Organization or Returning Youth Minor Sport Organizations with additional ice time request. <input type="checkbox"/> New Recreational & Commercial Users. <input type="checkbox"/> |
| Rink, Dates and Time Requested: (You can add a separate sheet with your request details) | Twin Rinks <input type="checkbox"/> Capital Subaru <input type="checkbox"/> Dates and Time: |
| Is this a multi-year request? | Yes / No |
| If this is a multi-year request, please specify the number of years requesting. | |
| Do you currently have a rental agreement with the Avalon Arena Association: | Yes / No |
| Additional Details: | |

Name & Signature of Requestor: _____

Date: _____

Please send completed Ice Time Request Form via email to shaggerty@nf.aibn.com.