



FACILITY / ICE BOOKING REQUEST FORM

Note: For those booking seasonal contract ice/floor times a separate form should be completed for special event requests such as: tournaments, competitions, etc. because of their specific date requirements.

User Group: _____ **Contact:** _____

Address: _____ **City:** _____ **Prov.:** _____

PC: _____

Phone: (_____) **Fax:** (_____)

Email 1: _____

Email 2: _____

Facility Name: _____ **Event/Group Name:** _____

Area Requested: (qplex/QMA) Ice Surface Dry Floor Boardroom Lobby

Conference Centre Kitchen Parking Lot-qplex Concourse

Date or Days of Week Requested / Please Specify AM or PM

Date (day/month/date/year): _____ **Time:** _____ AM/PM **To** _____ AM/PM

Date (day/month/date/year): _____ **Time:** _____ AM/PM **To** _____ AM/PM

Date (day/month/date/year): _____ **Time:** _____ AM/PM **To** _____ AM/PM

Date (day/month/date/year): _____ **Time:** _____ AM/PM **To** _____ AM/PM

Date (day/month/date/year): _____ **Time:** _____ AM/PM **To** _____ AM/PM

Date (day/month/date/year): _____ **Time:** _____ AM/PM **To** _____ AM/PM

Date (day/month/date/year): _____ **Time:** _____ AM/PM **To** _____ AM/PM

Signature: _____ **Date:** _____

Comments:

OFFICE USE ONLY:

Entered By: _____ **Date Entered:** _____