## CITY OF WALTHAM 2011-12 ICE RENTAL REQUEST FORM

/eteran's	Memorial	Rink,	Totten	Pond	Rd.,	Waltham	l
(D aaaaaamrint)							

(Please print)

**ORGANIZATION:** ADDRESS: PHONE: FAX: NUMBER OF YEARS AT THIS RINK: **CONTACT PERSON** PAYMENT PERSON Name: Name: Address: Address: Telephone: Telephone: Day: Day: Night: \_\_\_\_\_ Night: Cell: Cell: Fax.: Fax.: Email: Email: **ADDITIONAL CONTACT ADDITIONAL CONTACT** Name: Name: Address: Address: Telephone: Telephone: Day: Day: Night: Night: Cell: Cell: Fax.: Fax.: Email: Email: **ICE REQUESTS** 

DAY	DATES	HOURS	FROM	ТО

## CITY OF WALTHAM 2011-12 ICE RENTAL REQUEST FORM

Veteran's Memorial Rink, Totten Pond Rd., Waltham (Please print)

ICE REQUESTS					
DAY	DATES	HOURS	FROM	ТО	

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DAY	DATES	HOURS	FROM	ТО

ICE REQUESTS					
DAY	DATES	HOURS	FROM	то	