Canlan Ice Sports – York

2012 Spring/Summer Contract Application

Contract Term: April 2012-September 2012

Please check one of the following:

❑ New Customer to Canlan Ice Sports – York

❑ Returning Customer from 2011 Spring/Summer

2011 Spring/Summer Contract #:_____

CONTACT INFORMATION: PLEASE PRINT NEATLY TO ENSURE ACCURATE INFORMATION

Organization Name:	
Contact Person:	
Address:	
City:	**Postal Code:**
Home Phone:	**Work Phone:**
Cell Phone:	**Fax Number:**
E-mail:	

ICE REQUEST INFORMATION : PLEASE PRINT NEATLY TO ENSURE ACCURATE INFORMATION

Day(s) Requesting:	
Time(s) Requesting:	
<u>Hourly</u> Rate Expectations (before tax):	
Intended use for the ice:	
Please check one of the following:	
❑ **Adult Group**	❑ **Youth Group: Age range_____**
Notes/Comments:	

❑ Please check if you would like to be added to our E-Mail list to receive updates regarding available ice times and ice sales specials throughout the year.

Completed applications can be e-mailed to york@icesports.com, faxed to 416-661-5747 or returned in person to the facility main office to the Attention of the Sales Coordinator.