

Ice Rental Agreement

Group / Organization:		
Rental Date://	yyyy/mm/dd)	
Rental Time: Hours		
Sheets Required: @ \$	/hour/sheet	\$
Number of Person's Attending:	_	
Instructors:	@ \$40/hour	\$
	HST:	\$
	Total:	\$
	Paid:	☐ e-Transfer ☐ Cheque
Contact:		
Name:		
Signature:	Print:	
We agree to adhere to all Highland Com and safety procedures.	munity Curling Club p	olicies, protocols,
Approved By:	Date:	//

c/o Highland Country Club 1922 Highland Heights London, Ontario N6C 2T4 EMAIL: CONTACT@CURLHIGHLAND.COM