

GROUP NAME _____ TEAM # _____

REPRESENTATIVE _____ REP. PHONE _____

ALTERNATE REP. _____ ALTERNATE REP. PHONE _____

MAILING ADDRESS _____

EMAIL _____

TIME SLOT(S) _____ START DATE _____ END DATE _____

Dates Arena Closed – December 24, 25, 26 & 31, Jan 1, and Statutory Holidays
 Dates to be Omitted _____

The Bon Accord Arena will be rented to the above group.

In signing this contract, I/we will strictly adhere to the conditions and rules governing use of the Bon Accord Arena. I/we also recognize our obligation to pay in full the amount of \$_____ per hour + GST for the rental of the ice. **Payment for the first half will be due November 15, 2020 and the second half will be due January 31, 2021. Return signed contract ASAP with a \$500.00 deposit to guarantee your ice slots.**

I/We agree at all times to indemnify the Town of Bon Accord, its officers, agents, volunteers and anyone acting on behalf of the Town of Bon Accord; and save harmless from all manners of action, cause of action, suit, claim, demand and cost whatsoever arising from action of its officers, councillors, employees, agents, invitees, licensees or leasees done pursuant of the allocation during the time the rental is in force.

I/We agree (at no cost to the Town of Bon Accord) to purchase insurance for the rental period and to add the Town of Bon Accord as an additional insured. **Proof of insurance must be returned with this contract.**

Each team is required to clean their players' boxes prior to ice time.

I/We will advise my/our members and participants involved in activities sponsored by our organization of the inherent risk of the activity and will take all actions and precautions necessary to conduct activities in a safe and orderly manner.

I/We agree to provide a Return to Play COVID-19 Protocol Plan prior to rental agreement confirmation.

Unused ice rental(s) will not be refunded. Groups that cannot use ice time may resell their ice slot directly provided that they:

- Advise the Town ice scheduler of any changes to contact information (name, address, and phone number) for the person in charge of the group.
- Ensure **ALL** documentation (arena rental contract, COVID-19 Guidelines, and proof of insurance) is remitted to Town ice scheduler or arena staff upon arrival of ice slot. Fillable forms available on the Town of Bon Accord website or by contacting the Town office.
- Inform the group of arena regulations and collect payment from the group.
- Accept responsibility for all damages, which may occur as a result of the group.

I/We understand that at certain times, special events will pre-empt previously booked activities. In such cases, the user will be notified fourteen (14) days in advance and the appropriate rate adjustment made. Cancellation necessitated by mechanical failure will result in a refund or replacement ice if available, for the ice time when lost.

- I/We authorize the release of my/our personal information for the purpose of coordinating, selling, and/or buying ice time.
- I/We understand my/our privileges to use the Bon Accord Arena may be revoked at any time at the sole discretion of the Town of Bon Accord.
- I/We understand that due to the ever-changing COVID-19 pandemic, rental contracts are subject to change without notice, as the Town of Bon Accord must follow all mandated guidelines from Alberta Health Services, the Government of Alberta and the Government of Canada, which may affect its facilities. **In the event of an outbreak, all paid contract funds will NOT be subject to refunds under any circumstances.**

The information collected on this form is authorized under Section 33(c) of the Freedom of Information and Protection of Privacy Act (FOIP). It will be used for arena contracts for the Town of Bon Accord. If you have any questions about the collection and use of the information, contact the Town of Bon Accord at 5025 - 50th Avenue, Bon Accord, AB, T0A 0K0 or by calling (780) 921-3550.

Association or Team Representative

Date

Alternate Representative

Town of Bon Accord Representative

RENTAL CONDITIONS:

PAYMENT: Failure to make payment by date stated on contract will result in immediate cancellation and reallocation of facility to another group. Cheques made payable to: **TOWN OF BON ACCORD**. Online payment options are also available. E-transfers will not be accepted. Mail cheques to: Gail Critchley 1-56204 Rge Rd. 240 Sturgeon County, A.B. T0A 0K3 or drop off at the arena office.

FLOODING: The ice will be flooded prior to each game. At any time the Arena shift supervisor on duty is the sole judge in deciding on the suitability of ice conditions, and he/she is authorized to enforce additional ice maintenance as necessary. Any ice maintenance required during rented time is considered as time booked by the user.

NO PLAYERS WILL BE ALLOWED ON THE ICE UNTIL APPROVAL BY ARENA STAFF.
Please respect our facilities, other users and staff. Please conduct your group's activities in an orderly and courteous manner. Responsible adult supervision is required for all activities involving minors. Dressing room keys will be given only to the coaches. There must be a coach in the dressing room at all times for Minor Hockey Teams. There must be a coach on the ice or players' bench at all times when Minor Hockey Teams are playing on the ice surface.

All players must wear proper regulated equipment when playing on the ice surface.

All groups will assume the facility in good condition and will leave the facility in good condition for the next group.

Please vacate facility within 15 minutes of the end of ice slot booked time.

NO ALCOHOL OR ILLICIT DRUGS ALLOWED.

The arena including the dressing rooms is a smoke-free environment. Offenders will be ticketed.

All groups must cooperate with the Staff and abide by their requests. Any exhibits or posters to be affixed must be approved by staff.

Any renter found abusing the facilities and/or equipment or failing to adhere to any of the above conditions, will have their privilege of use suspended pending reinstatement by the Town of Bon Accord.

Willful damage may result in a fine levied against the renter and/or legal proceedings.

I have been advised of the Facility Rental Procedures pertaining to the aforementioned rental facility, which I have read and understood in its entirety.

Should you have any concern about the facility please contact the Facility Operator, Andrea Owen at 780-921-3838.

ALL TEAMS WHO HAVE BOOKED ICE TIME FOR REGULAR GAMES AND/OR TOURNAMENTS ARE FINANCIALLY RESPONSIBLE FOR THE ICE TIME AT THEIR APPLIED RATES. IF THE ICE IS NOT REQUIRED IT IS THE RESPONSIBILITY OF THE TEAM TO SELL THE ICE. TOURNAMENT BOOKINGS REQUIRE A 50% DEPOSIT OF TOTAL BOOKED TIME.

I, _____ (print name) acknowledge having read and understood the liability release and accept the terms therein.

Association or Team Representative

Date