



# Ice Rental Request Form

Please submit a completed form to the Recreation & Facilities Manager before May 31 for equal consideration. Ice will be allocated according to the Township of Zorra - Ice Allocation Policy # 700-03

**Organization, Group or Individual:** \_\_\_\_\_

**Contact Person:** \_\_\_\_\_ **Title:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_ **Cell:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Facility:**  Embro Zorra Community Centre  Thamesford District Recreation Centre

Please indicate below your first and second choice for ice time(s)

First Choice(s)		Second Choice(s)	
Start Time	Finish Time	Start Time	Finish Time
Monday		Monday	
Tuesday		Tuesday	
Wednesday		Wednesday	
Thursday		Thursday	
Friday		Friday	
Saturday		Saturday	
Sunday		Sunday	

**Notes:**

**Requests to be submitted to:**  
**Zorra Recreation Staff**  
**Fax: 519-485-2520**  
[booking@zorra.on.ca](mailto:booking@zorra.on.ca)  
 or submitted to either arena

For more information please contact Matthew Brown - Recreation and Facilities Manager  
[mbrown@zorra.on.ca](mailto:mbrown@zorra.on.ca) or 519-617-2793