



City of Saint John- Growth and Community Services
APPLICATION FOR FALL/WINTER ARENA ICE TIME – 2022 / 2023 SEASON

League / Team Name				
Affiliation (Please circle)	Provincial Governing Body (HNB, Skate NB)	School	Independent	Commercial/Business
Level of Play (Please circle)	Youth Recreational*	Youth General A* Youth General B*	Adult	Identify as (circle); Female Male Coed
Breakdown of Teams in Organization , (# of teams and breakdowns U7, U8, U9, etc). Teams (identify as)- Coed (CE), Male (M), Female (F).				

Contact Names: (Please note: All ice time requests will be reviewed – times provided in previous years are subject to change)							
1 st Name				2 nd Name			
Address				Address			
City				City			
Postal Code				Postal Code			
Phone (Home)	Work			Phone (Home)	Work		
	Cell				Cell		
Email				Email			

Arena Preference (list 1 st & 2 nd choice)	Time Preference					
	Days		Dates		Time	
	Start	End	Start	End	Start	End

Please note day/dates you wish excluded from your schedule (March Break, Christmas-New Year Period)

Arena Cancellation	Day(s)	Date(s)	Hour

Indemnification and Insurance Requirements

- Yes, Organization/Group has own insurance and will provide a copy to the City of Saint John
- No, Organization/Group does not have insurance and will require it through the City of Saint John’s insurance center

Arena Ice Booking Acknowledgments

I have read the following: By applying for ice with the City of Saint John, the above-named association/league/team recognizes its responsibility to allow participants the option to select or deny an informed consent request to share personal information with the City of Saint John for residency verification purposes. Failure on the part of the above names association/league/team to allow participants this option will deem all participants non-residents by default.

Flash Ice Sales

- Yes, please include my email address listed above to the mail out communication for Flash Ice sales through the season.

We have read the attached ice time allocation and management policy and on behalf of the above-named organization/league/team, we agree to abide by them. We also understand that we are personally responsible for the complete and full payment of all monies payable to: City of Saint John. We understand non-compliance will terminate our ice time.			
Dated:		Signed:	