



## Bob Snodgrass Recreation Complex Indoor Booking Request

Please complete request form and submit to Customer Service and Bookings Administrator at the Bob Snodgrass Recreation Complex at [ParksandRec-Bookings@highriver.ca](mailto:ParksandRec-Bookings@highriver.ca) or in person at 228 – 12 Ave SE, High River AB, T1V

Today's Date	Organization
Contact #1 Name	Phone Number
Email	
Contact #2 Name	Phone Number
Email	
Billing Address	
*Emergency Contact emergency scheduling conflicts	
Type of organization <input type="checkbox"/> Local Adult <input type="checkbox"/> Local Youth <input type="checkbox"/> Local Senior <input type="checkbox"/> School <input type="checkbox"/> Non-Resident/Commercial Non-profit group # _____	
Does your organization have liability insurance to cover individuals while using a facility? <input type="checkbox"/> Yes <input type="checkbox"/> No	

### Facility

- |  |   |
|--|---|
| <input type="checkbox"/> Large Arena – ICE (September – March) | <input type="checkbox"/> Large Arena – DRY (April – August) |
| <input type="checkbox"/> Small Arena – ICE (September – March) | <input type="checkbox"/> Small Arena – DRY (April – August) |
| <input type="checkbox"/> Field House – FULL                    | <input type="checkbox"/> Field House – Half                 |
| <input type="checkbox"/> Meeting Room – Shawne Board Room      | <input type="checkbox"/> Studio B (Birthday Room)           |
| <input type="checkbox"/> Pool                                  | <input type="checkbox"/> Lobby                              |

### User Group season

REGULAR SEASON DATES	Start Date		Finish Date	
Breaks (if applicable)	From		To	
	From		To	
	From		To	
*Playoff Season (if applicable)	From		To	

### Booking Request Dates

Date(s) from and to	Time/Hours	Date(s) from and to	Time/Hours

**\*Please attach any additional requests**



**Special Requests**

	#	Location(s)
Chairs		
Tables		
Other: <i>(please specify)</i>		
Other: <i>(please specify)</i>		
Set up requests		

Facility users **must submit notice of cancellation** of rental time(s) to the Bookings Administrator in writing or by email **14 days in advance** of the rental. If a rental is cancelled within 14 days' notice, no refund or credit will be issued unless the facility is rented to another user.

I \_\_\_\_\_ have read the above cancellation policy. \_\_\_\_\_ Initial

**User is responsible for:**

1. All terms set out in the License to Use Contract
2. Obtaining all required Licenses and Permits
3. Vacating premises as scheduled
4. Any additional janitorial fees which may apply

**How to Make a Booking**

1. Download the booking form
2. Please read Terms and Conditions on the booking form
3. Return the completed form to the Bob Snodgrass Recreation Complex or by email
4. We will contact you upon receiving the form

For more information contact Kira at 403-603-3554 or email [ParksandRec-Bookings@highriver.ca](mailto:ParksandRec-Bookings@highriver.ca)