

Kenai Ice Reservation Request Form

City of Kenai Parks & Recreation Office 907-283-8262-Tyler Best Assistant Parks and Rec Director

CONTACT INFORMATION	
Organization	
Contact Name	
Phone (Cell)	
	Zip
Email	
EVENT INFORMATION	
Purpose of Event	Number of People
Date of Event	☐ Public Event / ☐ Private Event
Arrival Time	_ Departure Time
8	ntee the date or time you are requesting. months of October through mid-March.
□Rental Fee Paid \$165.00 □Tax Paid \$9.90 Total Paid Payment Type	
☐ Card ☐ Check (C	Check #) □
harmless from all liability and claims for damages of property. It is your responsibility to inform all members	g facility hereby agrees to hold the City of Kenai and its employees any nature or kind by reason of any act while on Park Department ers of your group of the Facility Rules and terms of this agreement ult in immediate loss of privileges and forfeiture of your deposit.
Signature	Date
the event, you have the option of selecting a new dat	
ADMIN	ISTRATIVE USE ONLY Date/Time:
Insurance Yes No 1	Facility Agreement on File Yes No
Data insurance received. Res	servation Confirmed