



Facility Rental Request Form

Name _____ Group _____

Address _____ City _____

State _____ Zip _____ Email _____

Business Phone _____ Cell Phone _____

Home Phone _____ Age of Participants _____ # of Participants _____

Sport, Activity, or Event _____

Day & Date(s) Requested:	Time (total time, inc. any warmup, etc.):	Area(s) Requested:	Cost:
1st _____	1st _____	1st _____	\$ _____
2nd _____	2nd _____	2nd _____	\$ _____
3rd _____	3rd _____	3rd _____	\$ _____
4th _____	4th _____	4th _____	\$ _____

50% DEPOSIT IS REQUIRED TO CONFIRM THE RESERVATION

I agree to pay the Total Amount Due prior to the first event. Cancellations result in a minimum 50% fee assessment.

Release & Waiver

The renter agrees to hold harmless the Adirondack Sports Complex, LLC, and its' officials and employees from and against any and all claims, suits, actions, damages, and/or causes of action during the term of this agreement, for any personal injury, loss of life, property and/or damage to property sustained in or about the said premises, and from and against all cost, expenses, and liability incurred in and about any such claims the investigation thereof or the defense of any action process brought thereon, and from and against any orders and/or judgments that may be entered therein. The renter also agrees that by signing below they will pay for any damages incurred while using the facilities of the Adirondack Sports Complex. Also, by signing below, this certifies that the rules for use have been read and understood.

Renter:

Printed Name: _____ Signature: _____ Date: _____

OFFICE USE ONLY Payments		Date	Method of Payment	Entered Into DASH (Date)
Rental Total	\$ _____		Check # _____ Cash ___ CC___	
1st Payment	\$ _____		Check # _____ Cash ___ CC___	
2nd Payment	\$ _____		Check # _____ Cash ___ CC___	
3rd Payment	\$ _____		Check # _____ Cash ___ CC___	
4th Payment	\$ _____		Check # _____ Cash ___ CC___	

GRILL REQUESTS: _____

OTHER REQUESTS: _____

Staff Member Reservation Confirmed: _____

Date Reservation Confirmed: _____

Credit Card: _____ Exp.: _____ Code: _____

Signature: _____ Date: _____