

St. Lawrence College: Athletic Facility Rental Form

Name of Lessee/Organization: Kingston Ultimate - Joel Yearsley

Billing Address: 550 Bagot Street

Street: Kingston, On, K7K 3L9 Apt.:

City: Prov. Postal Code:

Telephone (W): 613-929-6797

Telephone (C):

Telephone (other):

Email: kingstonultimate@gmail.com

Name of Person In Charge:

Telephone (W):

Telephone (C):

Telephone (other):

Email:

Date(s) Required: Wednesday's June 4,11,18,25 July 2,9,16,23,30 Aug 6,13

Time(s) Required: 5:30pm-8:30pm = 3 hours **33hours Total**

Start Time: End Time:

Recurring Rental: Yes X No

If yes, start/end date: Start Date (M/D/Y) End Date (M/D/Y)

Responsible for setting up the floor covering

Responsible for lining field

Responsible for complete set up and take down of gym and or field

Responsible for arranging extra Custodians (if required)

Responsible for complete clean up after your event

Responsible for arranging extra electrical service (must be approved by College)

Responsible for providing and paying Campus Security

Responsible for inspecting & reporting any hazards prior to activity

Responsible for supervision *please see the next page for more details

Date: May 30, 2014

Internal

External

Facility

Gymnasium

Soccer Field

Rugby Field

Beach Volleyball Court

Dressing Room

Other

Event Description/ Purpose

Ultimate League

Set Up Requirements

Call security to open gates

User Group	Rate Per Hour	Notes
X	41.00	Adult Prime time

SLC Approval

Signature of Lessee

Date

Leesse	College	Rate/ Hour
		NA
X	X	NA
		NA
X		NA
		NA
		NA
X		NA
		NA
X		NA
X		NA