## **EIFSC Facility Request Form**EIFSC Board approval required prior to submission to rink management.

Name of Facility:	
Submitted by:	
Date Form Submitted:	
Board Approval:	Y or N (circle one)
Phone:	
Email:	
Date Requested:	
Time Requested:	
Rink:	Olympic NHL N/A (circle one)
Description of Use:	
Rental Rate:	
Concessions Required:	
Lobby Set Up:	(attach drawing if necessary)
Locker Rooms Required:	Y or N # of
Ice Cut Schedule:	
Party Rooms Required:	Y or N # of
Party Room Set Up:	(attach drawing if necessary)
Special Requests:	
Approved by:	EIFSC Officer Signature Required
Date:	