



**Commonwealth of Massachusetts-Department of Conservation & Recreation**

*Rink Operations*  
165 William J Day Blvd.  
South Boston, MA 02127  
617-727-5290 x506  
Fax 617-727-7059

*Governor, Charles D. Baker*  
*Lt. Governor, Karyn E. Polito*  
*Secretary EOEEA, Matthew A. Beaton*  
*Commissioner, Leo Roy*

# 2019 -2020 ICE RENTAL REQUEST FORM

( Please Print )

**ORGANIZATION/GROUP:** \_\_\_\_\_

**MAILING ADDRESS:** \_\_\_\_\_

**CITY:** \_\_\_\_\_

**STATE:** \_\_\_\_\_

**ZIP:** \_\_\_\_\_

**EMAIL:** \_\_\_\_\_

**PHONE:** \_\_\_\_\_

*Please make payments payable to: Comm. of Mass./D.C.R.*

**CONTACT PERSON**

**Name:**  
**Address:**  
**Address:**  
**Telephone # Day:**  
**Night:**  
**E-Mail:**

**PAYMENT PERSON**

**Name:**  
**Address:**  
**Address:**  
**Telephone # Day:**  
**Night:**  
**E-Mail:**

## PREFERRED ICE TIME(S) \*

**Rink:** \_\_\_\_\_

**Group Type:** \_\_\_\_\_

DAY	DATES	# HOURS	FROM	TO

*\* Preferred ice requests are pending till you receive written confirmation from the DCR.*

**Reminder: Any cancellations of confirmed ice rentals are required to be in writing, two weeks prior to the date being cancelled or your group will be responsible for the full rental charges.**

**Skate rentals and concessions at our ice rinks are independently contracted. Please contact us for more information.**