

SKY RINK HOCKEY LOCKER APPLICATION (2009/2010)

EXPIRES _____

Last Name _____ First Name _____ Employee Coach Ass't. Coach
 Referee Guest Pro

Home Address _____ Apt.# _____ E-mail _____

City _____ State _____ Zip _____ Parent/Guardian _____
(if under 18 yrs. old)

Home Phone _____ Work/Daytime Phone _____ FAX _____

Comments _____

All lockers are on a yearly rental basis and will not be prorated.

LOCATION	HALF SIZE LOCKER	GOALIE LOCKER
Main Lobby		
Canadiens		
Black Hawks		
Red Wings	Before August 15: \$552	Before August 15: \$888
Maple Leafs	After August 15: \$580	After August 15: \$935
Men's Club		
Women's Club		
First Floor (18 yrs. & older)		
Rangers	Before August 15: \$600	Before August 15: \$924
Bruins	After August 15: \$630	After August 15: \$975

Locker #: _____
 New
 Renewal

Locker Room:
 Canadiens
 Black Hawks
 Red Wings
 Maple Leafs
 Men's Club
 Women's Club
 Rangers (18 yrs. & over)
 Bruins (18 yrs. & over)

Locker Size:
 Half
 Goalie

Terms of Rental Agreement:

The full locker fee is due at the time of initial application or renewal. All lockers must be renewed and paid in full by August 31, 2009. Any locker that is used but not rented will be clipped and the contents will be stored for 30 days. The Management is not responsible for any personal property lost or stolen from the locker(s) or the locker room(s) at any time. Renters are not permitted to personalize locker with stickers or other markings. Any renter found guilty of causing damage to the locker rooms or locker will be liable for the cost of all repairs and/or replacements and their locker contract will be discontinued without refund. No refunds will be granted for withdrawals. ALL PRICES INCLUDE TAX.

Total Amount Due _____ Total Amount Paid _____ Balance _____ **Term: From _____ To _____**

PAYMENT METHOD Amex Discover Mastercard Visa Cash Check (payable to Sky Rink at Chelsea Piers, L.P.)

Credit Card Number _____ Expiration Date _____



I authorize Sky Rink to bill the above credit card for the amount due.

Authorized Signature _____ Date _____

*Any returned checks will be subject to a \$25 service charge plus any bank charges, as well as denial of acceptance of any further checks.

Rental Agreement:

I have read the above and agree to the terms as stated.

Signature (Parent/Guardian if under 18 years old) _____ **Date** _____

Please send application and payment to:

Locker Rentals • Sky Rink at Chelsea Piers • Pier 61 • New York, NY 10011 or FAX to: 212.336.6130