INDOOR ICE RENTAL PERMIT
Marathon Park

Wausau & Marathon County
Parks, Recreation
& Forestry

Name: _____

Organization (if applicable) : _____

Phone: _____ E-mail: _____

Tax Exempt #: _____
(If Applicable)

Rink 1 or Rink 2 (Circle Applicable Rink) (Circle Applicable Rate Below For Each Date)

Date	Time ie 8:30pm-10pm	Hours	Pre-Tax / With Tax	Cost
			$145.00 / $152.98	$
			$145.00 / $152.98	$
			$145.00 / $152.98	$
			$145.00 / $152.98	$
			$145.00 / $152.98	$
			$145.00 / $152.98	$
			$145.00 / $152.98	$
			$145.00 / $152.98	$
			$145.00 / $152.98	$
			Total Cost:	$

Reservable 7 Days a Week
From 8am - 11pm

I agree to indemnify and hold harmless the Park Commission, City of Wausau and Marathon County, and their employees, elected and appointed officials and agendts from any and all liability from claims of bodily injury, property damage or any other nature whatsoever arising out of the use of Wausau or Marathon County properties herein specified.

I agree to abide by all rules and regulations formulated by the Commission for the use of buildings and facilities.

*Applicant Signature_____
Date:_____

$_____ Cash
$_____ Check #_____
$_____ Credit Card Date: _____
_____ Receipt # Issued By: _____

P824
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