

Russell Sports Dome

Field Rental Policy



Municipalité de
RUSSELL
Township

General Rules

Arrival and departure

- Please arrive ready, clothing changed, and water bottle filled. Proceed to dome entrance as instructed by facility staff. **Shoes must be changed in designated area** and bags stored away on sideline or on bleachers (if necessary).
- An hour booking provides 55 minutes of playing time. Participants will have access to the field **5 minutes** before the scheduled start time. A chime will sound **10 minutes** to the hour, indicating it's time to wrap up. The field **must be cleared 5 minutes before the scheduled end time** to allow for the next group to enter. Please refer to the contract for additional details.
- Please make sure to gather all personal effects upon departure.

Spectators and players

1. A pair of indoor shoes is mandatory to gain access to the dome portion of the facility. Outdoor shoes must be left in designated area.
2. Metal cleats are not permitted.
3. No food or beverages are allowed inside the dome, only water is permitted. Spectators and players may eat or drink in the lobby or waiting area.
4. Please refrain from blocking or obstructing the track when accessing the field or spectating an activity.
5. Teams are not allowed to warm up on the track or the multisport court.
6. Parents/Visitors are asked to remain on the synthetic field where their group or association is playing.
7. Parents/Visitors interested in using the gym must pay the drop-in fee.
8. Respect is paramount. Disorderly conduct, inappropriate behavior, and abuse of the facility's equipment or staff will not be tolerated.

The **Township of Russell** Conditions of Use for Dome must always be followed; failure to comply will result in immediate removal from the facility, non-refundable field cancellation and review of future contract bookings. The contract holder agrees that by visiting the Russell TWP Sports Dome, he/she assumes all risks including any risk of injury, loss, damage, or exposure to communicable disease.

Client Signature: _____ Date: _____