Physical Address

13901 S. Robert Trail Rosemount, MN 55068

Business Office Address

5886 Blackshire Path, Suite 200 Inver Grove Heights, MN 55076

LICENSEE (your name and signature):___



Irish Sports Dome www.irishsportsdome.com sales@IrishDomeMN.com cell or txt | 651-485-8843

This application is for

RHS Student Parking & Rental use (Coaches, Umps)

Parking Permit Agreement	DATE
First and Last Name (student, coach, etc):	
Mailing address:	Display issued parking pass
City State & Zip:	on vehicle windshield mirror
Email:	_
Cell (student, coach):	Parking pass #
VEHICLE INFO	
Car Make:	_
Model and Color:	
Plate #:	_
At the request of, Irish Sports Dome hereby grants to request terms and conditions which Irish Sports Dome and requestor hereby agree to follow Front North Parking Lot (for umpires and coaches only). Provide team name/association/club and season (fall, wtr, spr)	
Southeast Parking Lot. RHS student parking School Days only, 6am-5:30pm \$85 per semesterFallWinter No Refund on pass, and a replacement pass is \$75 Cash or check only Complete this agreement, scan, and email to sales@irishdomeN FALL Semester Pass will be available for pickup at the dome on to year. If application is received after that day, pass can be picked date and time.	<u>IN.com</u> the Tuesday, before the first day of the school
Permit holder shall use the parking space only to park the car listed. Irish Sports Dome or its agents shall not be liable for any damage to property of permit holder or of others entrusted to emplor or otherwise, nor for any injury or damage to persons or property resulting from any cause of whatsoever nature Permit holder shall not assign this agreement nor sublet the parking privilege, nor allow the parking space to be used by othe Irish Sports Dome may terminate this permit, at any time for any reason or no reason. Upon the expiration of the permit, this permit card to the Irish Sports Dome.	ers, without the prior written consent of the Irish Sports Dome in each instance.