

(This is a template. Please alter to your own standards. Make sure it conforms to local and regional best practices and local and regional laws and by-laws.)

Month Day, Year

Company Name

Address

City, State/Province, Zip/Postal Code

Attention: Name of Contact, Position

Dear First Name,

Thank you for selecting Your Hotel Name to host your upcoming conference. The following contract outlines the details for your upcoming conference on Arrival Date.

Conference Details:

Arrival Date until Departure Date

GUEST ROOMS

Date:	Date 1	Date 2	Date 3	Date 4	Date 5
Room Type 1					
Room Type 1					
Room Type 1					
Room Type 1					
Total Block:					

Room Rates

We are pleased to confirm the following special rates from arrival date until departure date:

Room Type 1	\$000.00
Room Type 2	\$000.00
Room Type 3	\$000.00
Room Type 4	\$000.00

The above room rates are per room, per night, and each additional person sharing a guestroom is \$00.00 per night. These rates are subject to 0% Goods and Services Tax (GST), 0% Provincial Sales Tax (PST), and 0 % Destination Marketing Fee (DMF).

The room rates are specifically negotiated for your function. By entering into this contract, a guest room block has been set aside for your group and cannot be released for general sale until thirty (30) days prior to arrival date. Hotel room rates outside of your block may fluctuate. However, it is understood that rates booked within this group block are guaranteed at the negotiated price and will not change.

Reservation Methods:

Upon signing this contract, referred to as “time of booking”, your entire guest room block, also referred to as your original expected guest room revenue, will be removed from our inventory and those rooms are considered sold to your group. Your guestrooms have been held under group block name Name of Block. Reservations within this block will be accepted until thirty (30) days prior to Arrival Date. Any remaining rooms that have not been reserved at that time will be released back into our inventory for general sale. Any reservation requests received after the release date will be accepted based on availability. The following reservation methods are available for your conference:

1. Individual Booking

Individuals will call in their reservations directly to the hotel at least thirty (30) days prior to Date of Arrival. The hotel number is 0-000-000-0000. Please advise your guests to identify themselves as being with the group block name name to ensure they receive your group rate. Guests will need to provide a valid Credit Card number upon booking. Anyone who wishes to cancel must do so forty eight (48) hours prior to arrival date, or the full guestroom charge will be billed to their Credit Card.

2. Rooming List

It is understood that you will be providing us with a complete rooming list at least thirty (30) days prior to Arrival Date. All rooms reserved to the rooming list will be guaranteed to the master account. Please forward the rooming list or any other information to Name.

Billing Arrangements:

Please indicate how your delegates' charges will be handled by checking one of the following boxes:

- Individuals to pay own room, tax, and incidentals
- Individuals to pay own room, tax, and incidentals; scheduled meals to be posted to Master Account.
- Room and tax to be posted to Master Account; incidentals to individuals
- Room, tax, and incidentals to be posted to Master Account

Check-In/Check-Out Times:

Check-in time is 0:00 p.m. Every effort is made to accommodate guests arriving before the check-in time, however, rooms may not be immediately available. Check-out time is 00:00 a.m. Requests to retain rooms beyond the check-out time should be directed to the Front Office Manager once the delegate is registered. Should it be possible to extend a late check-out, a late departure charge may be applicable.

Parking:

Overnight covered parking \$0.00 per vehicle, per day, plus applicable taxes, subject to availability.

Meeting And Function Room Requirements:

Day:	Start Time:	Function:
Date:	End Time:	Room:
Estimated # Guests:	Rental Fee:	Set-up:

The above-mentioned meeting/function rooms have been reserved for your function. The function room rental fees include one function room set-up. Labour fees will apply for unscheduled resets. The hotel reserves the right to re-assign an alternate meeting/function room that is suitable for your group size. The hotel will not be held liable for any loss of, or damage to, personal property left in any function room. In accordance with Your City By-Law No. 0000-000, smoking is not permitted in any of our meeting rooms or public areas. The convenor accepts full responsibility for the actions of their group and will be liable for any and all damages caused by their guests. The hotel reserves the right to inspect any ongoing function.

As storage space is limited, arrangements must be made in advance with the catering office for receiving, storage and return of materials prior to, during and/or following a function. All items must be clearly labelled.

Food & Beverage:

Menu prices will be guaranteed sixty (60) days prior to the event. For the purpose of final preparation by our staff, we request that final changes to your menu be made at least thirty (30) days prior to your function. Prices are subject to 8% PST, 6% GST, and 15% Gratuity. Prices are per person, not per unit, unless otherwise stated. Billing will be based on the guaranteed number of guests or the actual number of guests in attendance, whichever number is greater.

The guaranteed number of guests for your function is required three (3) business days prior to the function. Please inform us of any guests in your group that have any food allergies, food sensitivities, or special dietary requirements so that we can take the necessary precautions when preparing their meal. Please be aware that food prepared in our kitchen may contain or have come in contact with peanuts, nuts, fish or other possible allergens. Therefore we cannot guarantee a 100% allergy-free environment. Your welfare is our first concern. The hotel will prepare for a maximum of 5% above the guaranteed number or if no guaranteed number is received, the estimated number of guests at time of booking will be used.

All Food & Beverage must be provided by the hotel and consumed on the premises. Removal of any food and/or beverage, whether or not consumed, is not permitted. No refunds will be given on any unconsumed food and/or beverage.

Cancellation Policies:

Upon signing this contract, a block of rooms are removed from our inventory and we consider the rooms sold to you. We make financial commitments based on the revenues we expect to achieve from your full performance of this contract. Therefore it must be understood, and agreed by you, that fully canceling your room block and/or function (**Cancellation**), or partially canceling your room block and/or function (**Attrition**), would expose us to substantial losses. Accordingly, you are subject to the Cancellation Policies outlined below.

Notice of any cancellations must be received in writing and the cancellation fee (if applicable) is payable no later than thirty (30) days after the cancellation has been received. All or a portion of the cancellation fee may be refunded if Your Hotel Your City recoups the lost room revenue and the lost Food & Beverage revenue. It is therefore critical, and in your best interest, to inform the hotel as soon as possible if Guestroom requirements or Food & Beverage requirements become less than originally booked. Cancellation fees are subject to applicable taxes.

Guestrooms

A full block of guest rooms has been set aside for your function. Reservations are held until 7:00 a.m. on the day following the first night reserved. To ensure availability, all reservations must be received by Your Hotel Your City at least thirty (30) days prior to Arrival Date. Your Hotel Your City agrees to hold your full block of guestrooms until thirty (30) days prior to Arrival Date. At this specified release date, any rooms from your original block that have not been reserved will be released back into our inventory for general sale. Should it become necessary for you to decrease your original room block, you are allowed a total decrease (**Attrition**) of 20% without a cancellation fee. If the attrition is greater than 20%, the attrition fee may be 80% of the original expected guest room revenue less the actual revenue of the guest rooms that have been reserved/sold from your original block.

Meeting & Function Rooms:

The function room rental fees are based on guest room sales from your block as well as the anticipated Food & Beverage revenue from your function. Any function room rental fees that have been discounted may be reassessed if the number of guest rooms sold falls below the total number of guest rooms blocked at the time of booking, or if the Food & Beverage revenue falls below the anticipated Food & Beverage revenue. 100% of the full non-discounted rental fee of all blocked function rooms may be applied if less than 80% of the guestrooms blocked at the time of booking are sold or if less than 80% of the anticipated Food & Beverage revenue is realized. If meeting and function rooms are cancelled within 30 days of the event, 100% of the full rental fee may be assessed.

Food & Beverage:

The anticipated Food & Beverage revenue is based on the estimated number of guests at time of booking and the estimated amount of Food & Beverage required at the time of booking. If the final Food & Beverage revenue decreases by more than 20% of the anticipated Food & Beverage revenue, the billing will be based on 80% of the anticipated Food & Beverage revenue less any revenue recouped from the resale of Food & Beverage and the resale of Meeting/Function space.

If a function is cancelled, a cancellation fee may apply and will be based on the following schedule:

Written cancellation notice received:

0-30 days

Cancellation fee due:

100% of anticipated Food & Beverage revenue

31-60 days

50% of anticipated Food & Beverage revenue

61-90 days

25% of anticipated Food & Beverage revenue

The cancellation fees shown above are due as liquidated damages. All or a portion of the cancellation fee may be refunded if Your Hotel Your City recoups lost room revenue and lost Food & Beverage revenue.

Billing & Information:

Master Account:

Our Credit Department would be pleased to discuss the possibility of establishing billing privileges for your group. Please complete the enclosed Credit Application and return to Your Hotel Your City for processing. Please allow at least two (2) weeks for verification of your Credit Application. If Master Account privileges are established, billing privileges will be extended, and payment is due within thirty (30) days of receipt of the invoice.

Deposit:

Your Hotel Your City will require an advance deposit of \$000.00 to be received along with this signed contract to confirm the booking. All deposits are non-refundable. If Master Account privileges are established, the deposit will be applied to the Master Account for this particular function. Alternately, the deposit can be applied to a credit card by completing the credit card authorization section below.

Payment:

Payment shall be made upon receipt of the statement. It is agreed that should payment not be made within thirty (30) days of the date of the final statement, interest charges in the amount of 1.5% per month (18% per annum) will be applied to the account. Interest charges are subject to change.

Credit Card Authorization:

Credit Card Company	Credit Card Number	Expiry Date
Cardholder (Please Print)	Cardholder Signature	Date

Confirmation Date:

If these arrangements meet with your approval, please sign and return this contract either by fax (000) 000-0000 or by mail before Contract Date. This will serve as your definite confirmation as well as the "time of booking". Until confirmation is received, all space arrangements are on a tentative, right of first refusal basis only.

For	_____ Signature Print Name Title Date
-----	---

Your Hotel Your City
Company

Signature Name of Salesperson Print Name Title of Salesperson Title Date of Contract Date
--

Your Hotel Your City Credit Application Form

Function Date _____ Name of Group _____

Name of Company _____

Address _____ City _____ State/Province _____ Zip/Postal Code _____

Telephone _____ Fax _____ Email _____

Parent Company _____ Address _____

City _____ State/Province _____ Zip/Postal Code _____

Name of Contact _____ Telephone _____ Fax _____ Email _____

Name of Bank _____ Account Number _____

Bank Address _____ City _____

State/Province _____ Zip/Postal Code _____

Name of Contact _____ Telephone _____ Fax _____ Email _____

PST Exempt _____ GST Exempt _____ Exemption # _____

Direct Billing of: Room and Tax Only All Charges

Credit References (must have all three)

1. _____
Name of Company _____

Address _____ City _____ State/Province _____ Zip/Postal Code _____

Name of Contact _____ Telephone _____ Fax _____ Email _____

2. _____
Name of Company _____

Address _____ City _____ State/Province _____ Zip/Postal Code _____

Name of Contact _____ Telephone _____ Fax _____ Email _____

3. _____
Name of Company _____

Address _____ City _____ State/Province _____ Zip/Postal Code _____

Name of Contact _____ Telephone _____ Fax _____ Email _____

In signing this credit application form, we acknowledge that the terms of payment are due upon receipt. Failing to meet these terms will result in suspension of direct billing privileges until account is paid in full.

Controller's Signature: _____ President's Signature: _____

Credit privileges may be reviewed from time to time and credit may be withdrawn at any time without liability to Your Hotel Your City. * Incomplete and/or incorrect applications will result in delays or refusal of credit privileges.