



812 South Hill Park Drive
Puyallup, WA 98373

Reservation Desk
253.848.4900
Sales Office Fax
253.770.0754

GROUP GUESTROOM AGREEMENT

| OFFICE USE ONLY | |
|--|----------------|
| GROUP CODE | |
| MASTER FOLIO | |
| AGREEMENT SENT | 1.3.17 |
| AGREEMENT DUE | 1.10.17 |
| ROOM LIST DUE | 6.1.17 |
| RELEASE DATE | 6.1.17 |
| ARRIVAL DATE | 6.23.17 |
| HOTEL CONTACT | |
| Ashley McAuliffe, Sales Manager 253.286.8402 ashley@hollanderhospitality.com | |

CLIENT DETAILS

| | | | | | | | | | | |
|--|----------------------|--|--------------------------|----------------------|-------------------------------------|-------------------------------------|---------------|--------------------------|-------------|------------------|
| GROUP NAME: Tacoma Highland Games Association | | | | | MARKET: SMERF | | | | | |
| CONTACT: Diana Kildow | | | TITLE: | | | EMAIL: sdkildow@thurston.com | | | | |
| PHONE: 360-264-2156 | | | | ALTERNATE: | | | FAX: | | | |
| ADDRESS: | | | | CITY: | | | STATE: | | ZIP: | |
| <input checked="" type="checkbox"/> | PHONE CONTACT | | <input type="checkbox"/> | EMAIL CONTACT | <input checked="" type="checkbox"/> | RENEWING | | <input type="checkbox"/> | NEW | REFERRAL: |
| NOTES: | | | | | | | | | | |

BLOCK DETAILS

| GUESTROOM TYPE | GUESTS PER ROOM | Friday | Saturday | Sunday | | | | | RATE PER ROOM | ROOM TOTALS | |
|---|---------------------------------|---------|----------|-------------------------------------|--|--|--|--|------------------------------|-------------|--|
| | | June 23 | June 24 | June 25 | | | | | | | |
| | | 2017 | 2017 | 2017 | | | | | | | |
| Double Queen | 1-4 | 10 | 10 | Depart | | | | | \$139 | 20 | |
| <i>13.5% Room Tax and \$1 per room night Pierce County Tourism Fee applies.</i> | | | | | | | | | | | |
| <input checked="" type="checkbox"/> | ROOMING LIST DUE: 6.1.17 | | | <input checked="" type="checkbox"/> | INDIVIDUAL RESERVATIONS DUE: 6.1.17 | | | | TOTAL ROOM NIGHTS | 20 | |
| NOTES: Nancy (treasurer) will submit a few names, rest will be call-in | | | | | | | | | *RELEASE DATE: 6.1.17 | | |

* On the Group Block Release Date, all rooms not reserved in the Group Block, will be released back into Hotel inventory.

PAYMENT DETAILS

| ORGANIZATION PAYS | | INDIVIDUAL PAYS | | METHOD OF GUARANTEE | | | |
|--|-------------------------|-------------------------------------|-------------------------|---------------------|-------------|----------------|----------|
| <input checked="" type="checkbox"/> | GUESTROOM + TAX CHARGES | <input checked="" type="checkbox"/> | GUESTROOM + TAX CHARGES | DIRECT BILL # | | PURCHASE ORDER | |
| | ROOM TELEPHONE CHARGES | <input checked="" type="checkbox"/> | ROOM TELEPHONE CHARGES | VISA | MASTERCARD | AMEX | |
| | INCIDENTAL CHARGES | <input checked="" type="checkbox"/> | INCIDENTAL CHARGES | DISCOVER | DINERS CLUB | OTHER | |
| | EVENT ROOM CHARGES | | EVENT ROOM CHARGES | CARD NUMBER: | | | EXPIRES: |
| | ROUTE TO MASTER FOLIO | | OTHER | NAME ON CARD: | | | |
| NOTES: Tacoma Highland will be paying for a few rooms that Nancy will submit, rest will pay own | | | | | | | |

If organization is to pay for room & tax charges only, individual guest credit cards will be required at check-in to cover any additional charges or possible damages. Please notify attendees of this policy.

Initials _____ Date _____



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253.848.4900

GROUP AGREEMENT GUIDELINES

Any and all reservations, agreements and contracts for the use of facilities and/or services of the Holiday Inn Express Puyallup are subject to the following terms and conditions:

AGREEMENT DUE DATE

This is a *tentative* agreement and not deemed in use until signed and returned to Hotel by the date specified on the Group Guestroom Agreement.

RELEASE DATE

The outlined room block will be held until the specified release date. Unsold rooms will automatically revert back to the Hotel's general inventory at 11:59pm on the release date.

After the release date the group rate will no longer be available and availability is not guaranteed.

GUESTROOM INFORMATION

The room block information is summarized on the Group Guestroom Agreement. The rate for each room will be per night plus applicable taxes and fees.

DOUBLE QUEEN ROOMS: Two queen beds with DVD player, refrigerator and microwave

SINGLE KING ROOMS: King bed with DVD player, refrigerator and microwave

ARRIVAL & DEPARTURE

Check-in time is 3 pm. Check-out time is 12 pm.

Due to time constraints, we do not guarantee early check-ins or late check-outs. Any guests checking out later than Noon may be subject to an additional night's charge. We will make every effort to accommodate the groups' special requests.

TRANSPORTATION

Hotel reservation staff will gladly assist you in making arrangements for the group.

PUBLIC AREAS

We ask that all our guests are courteous of other guests in the hotel and be mindful of quiet hours between 10 pm and 8 am. We do not allow consumption of alcoholic beverages in public areas of the hotel. Thank you for your cooperation.

Initials _____ Date _____

RESERVATION METHODS

ROOMING LIST Rooms may be guaranteed by providing a rooming list on or before the release date. Upon receipt of the rooming list the Hotel will assume the list reflects the total number of rooms the group will be utilizing. Any rooms remaining in the block will be released back into regular hotel inventory.

INDIVIDUAL CALL-INS Guests may phone hotel directly at **253.848.4900**, call the central reservation office at **1.888.HOLIDAY** or book **online** using your group code listed above to make reservations. Guests will need to reference either the group name or group code when they call to reserve their room in the block.

PAYMENT METHODS

DIRECT BILLING It is understood that all group charges may be master billed to your organization and are payable upon departure. If your organization wishes to establish a direct bill account for your event, please contact your Sales Manager. Direct Bill accounts establish a permanent billing procedure to companies or individuals whom schedule events on a regular basis. Payment for direct billed accounts is due and payable in full within thirty days of departure.

MASTER ACCOUNT If your group's charges will be paid for by one credit card, an authorization form will be forwarded with this contract and is due with the signing of the contract. The group will have the option upon departure to leave charges on the credit card or to bring a company check for payment. A pre-authorization will be held on this credit card with the estimated authorized charges. All master account charges must be paid at the time of departure.

INDIVIDUAL ACCOUNT It is understood that your guests may be responsible for their own room, tax and incidental charges, payable upon departure.

DAMAGES

Damages to the hotel and incidentals will result in a charge to the responsible party. The hotel will consider the group the responsible party and charges will be billed accordingly in the event that individual travelers do not present a credit card for incidentals.

COMMISSION

The group room rates are net non-commissionable.

SALES & MARKETING

Prior to publication or distribution, any and all advertising or promotional materials developed, placed or used by the organization to promote the Hotel using the Hotel's trade name, trademarks, or logos shall be submitted to Hotel for prior approval.

ADDITIONAL ITEMS

This contract represents the entire agreement between the Hotel and the organization. Neither change of ownership or management of the Hotel nor a change of management of the group relieves either party of the responsibility or obligations of this agreement.

ACCEPTANCE

This agreement will become fully implemented when the group contact receives a copy of the signed agreement from the Hotel. The Hotel will consider invalid any changes made to this agreement, unless they are signed and approved by the Hotel sales representative. If a signed original or faxed copy of this agreement is not received by the due date, the Hotel reserves the right to withdraw its agreement and to release all space and arrangements made for this group.

Initials _____ Date _____

AGREEMENT DETAILS: *The undersigned customer acknowledges that he/she has read, understands and acknowledges all terms and conditions of this agreement as set forth in the Group Agreement Guidelines. In order to reserve your group block, please sign below and initial all pages. Your signed agreement must be received by: January 10, 2017*


CUSTOMER ACCEPTANCE DATE

HOTEL CONTACT ACCEPTANCE DATE

Initials _____ Date _____