

Best Western Plus Kelly Inn

Each Best Western hotel is independently owned and operated.

Group Accommodations Contract

Printed: Tuesday, November 05, 2013

New Revision

CONTRACT INFORMATION

Organization TRE LAG STEVNE	Group Name TRE LAG STEVNE
Contact DICK LUNDGREN	On-site Contact DICK LUNDGREN
XX	Phone (952)288-5141
XX	Fax
XX, XX XX	Ext

ACCOMMODATION INSTRUCTIONS

Group Code TLS14 **Arrival** Wednesday, August 06, 2014 **Depart** Sunday, August 10, 2014

	Date			
Room Type	8/6/2014	8/7/2014	8/8/2014	8/9/2014
DKNS	10	10	10	0
KNS	15	15	15	0
SDQNS	30	30	30	0
Grand Total	55	55	55	0

Rates beginning 8/6/2014	Room Type	Single	Double	Triple	Quad
	KNS	\$81.00	\$81.00	\$81.00	\$81.00
	DKNS	\$81.00	\$81.00	\$81.00	\$81.00
	SDQNS	\$81.00	\$81.00	\$81.00	\$81.00

RESERVATION INSTRUCTIONS

Individual/Phone-In Rooming List (Contact/Planner Only)

Arrival Time 12:00 AM **Group Check-In** Yes No **Transportation Needs** _____

Depart Time 12:00 AM **Pre-Registration** Yes No _____

Baggage Service _____

BILLING INSTRUCTIONS

<u>Individual</u>	<u>Master Account</u>	<u>Method of Payment</u>
<input type="checkbox"/> Room & Tax	<input type="checkbox"/> Room & Tax	Group 4PM Exp
<input type="checkbox"/> Incidentals	<input type="checkbox"/> Incidentals	Guest 4PM Exp

Tax ID

Billing Comments

ADDITIONAL INFORMATION

\$81 FLAT RATE. 1:40 COMP AND 5 SUITE UPGRADES

CONTRACT TERMS

To Guarantee the rates quoted, the availability of the sleeping rooms, and other terms of the contract, the following deadlines must be met or the rooms may be closed.

Sign contract and return by	Deposit Amount 0.00	Deposit Deadline
Room Block Cut-off Date	*Rooming list is due by	
Cancellation Policy:		

Upon receipt of this signed contract, the booking shall be changed to a Definite status. Deposits and/or credit card guarantees may be retained as a cancellation fee.

*Reservations made after the group cut-off date will be honored based on availability

CANCELLATION POLICY

If cancellation of this booking becomes necessary, to avoid forfeiture of any deposits paid or payment of Penalties, the hotel must receive written notification no later than

I have read the above contract and agree to the terms and conditions as stated.

Hotel Representative

Date

Client's Signature

Date

PLEASE SIGN AND RETURN TO THE HOTEL