

EVENT RESERVATION CONTRACT

Event Date(s) _____
First Meal _____ Last Meal _____

Organization Name

Contact Person

Address _____ City _____ State _____ Zip _____

Day Phone _____ Night or cell _____ Email _____

- 1) A \$50 deposit is required to secure your date(s) Please enclose payment with a copy of this signed contract, along with the white form showing *estimated* numbers. This deposit will be applied to your total fees, but is non-refundable in case of cancelation.
- 2) Return Yellow copy of contract showing Guaranteed numbers for food & bed space, with payment for Total Food Service Fee (C) 14 days prior to your event. Final payment will be computed using this 14 day update as a minimum We do not adjust guaranteed numbers upon your arrival to reflect a smaller group.
- 3) Extended meetings will be charged at the rate of \$15 per hour or portion of an hour.
- 4) Accommodation fees, sales tax if applicable, (- deposits paid) are payable at our Office upon arrival. Any additional charges are payable prior to your departure .
- 5) Responsibility for damage – Group agrees to guarantee payment for repair or replacement costs for damage to the buildings beyond normal wear & tear.

*Your signature below constitutes agreement to all the above stipulations

* _____
Authorized Signature _____ Date _____

Method of payment: Check to Shepherd's Staff _____ Visa _____ Master Card _____
Credit Card # _____ Exp Date _____ CV: _____
Billing Address of Card Holder _____

Signature _____

Looking forward to serving you - Joan and "the Staff"