

Walker Creek Ranch Conference Center 30-Day Reservation Confirmation (AS OF 7/1/09)

Due: _____

Please complete this 30-Day Reservation Confirmation Agreement as accurately as possible. The number of participants listed in this document should be within 10% of your contract, and is considered your *"minimum guarantee"*. The information provided here will be used to finalize your food service package, lodging and meeting room assignments and set-up, and the Estimate of Final Bill for your program. Final billing is based upon this 30-Day Reservation Confirmation, or the actual number of participants in your program, whichever is greater. If you have any questions please contact the Conference Center Office at (415) 491-6603.

Name of Organization / Program	Name of primary contact person
Arrival Date & Time	Departure Date & Time
First Meal:	Last Meal:
Phone:	Fax:
Email:	

Lodging Package	Day 1 ~ Date	Day 2 ~ Date	Day 3 ~ Date	Day 4 ~ Date*
	Adults / Kids (4-10)	Adults / Kids (4-10)	Adults / Kids (4-10)	Adults / Kids (4-10)
Semi-Private	/	/	/	/
Economy	/	/	/	/
Private	/	/	/	/
Camping	/	/	/	/
Day Use Only	/	/	/	/

Notes:

** Note: For programs of more than four days, please use the "Extra Days Form", provided.*

For office use only:

Group: _____ Dates: _____

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Meal Service Package	Day 1	Day 2	Day 3	Day 4 *
	Adults / Kids (4-10)	Adults / Kids (4-10)	Adults / Kids (4-10)	Adults / Kids (4-10)
Breakfast	/	/	/	/
Lunch	/	/	/	/
Dinner	/	/	/	/
<p>Special Notes on Meal Service:</p> <p style="text-align: center;">PLEASE NOTE MEAL TIMES 8:00 Breakfast • 12:00 Lunch • 6:00 Dinner</p>				

* Note: For programs of more than four days, please use the "Extra Days Form", provided.

Important Dietary Considerations

# of Vegetarian / Vegan	Food Allergies	Other Special Dietary Needs
Please let us know how many people in your group require vegetarian and/or vegan food service. # of Vegetarian: _____ # of Vegan: _____	Please list any known Food Allergies here. Please provide and attach additional information if necessary.	Let us know any other special dietary needs you may have, and attach additional information if necessary.

Snack & Beverage Service (Check Prices on Rate Sheet)

Please note # of people Snacks & Beverages are needed for.	Day 1	Day 2	Day 3	Day 4
	Adults / Kids (4-10)	Adults / Kids (4-10)	Adults / Kids (4-10)	Adults / Kids (4-10)
Coffee Service	/	/	/	/
AM Snack & Bev	/	/	/	/
PM Snack & Bev	/	/	/	/
Please let us know what time(s) you would like your Snack & Beverage Service(s). <p style="text-align: center;">Our Food Services Manager will be happy to discuss Snack & Beverage options with you.</p>				

For office use only:

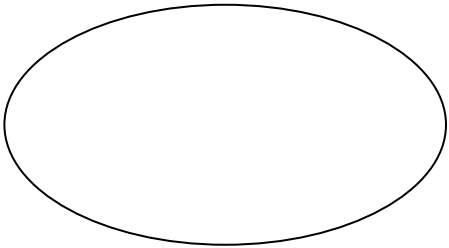
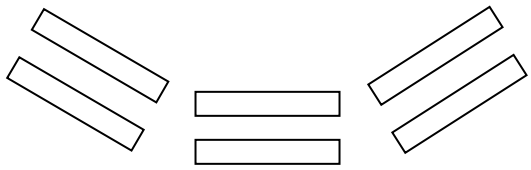
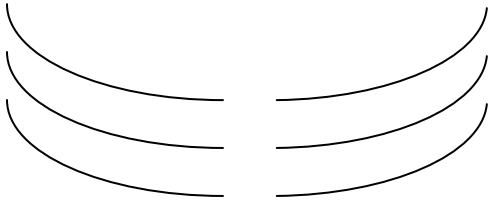
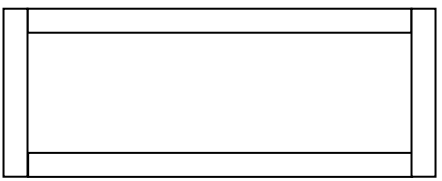
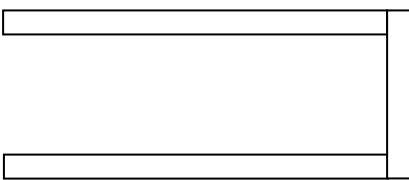
Group: _____ Dates: _____

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Meeting Room Set-up Requests

<p>Number of Tables:</p> <p>Number of chairs:</p>	<p><input type="checkbox"/> Projection Screen</p> <p><input type="checkbox"/> Easel with Pens</p> <p><input type="checkbox"/> Dry Erase Board with Pens</p>
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Set-up Style

<p><input type="checkbox"/> Circle / Oval (Chairs only)</p> 	<p><input type="checkbox"/> Class Room Style</p> 
<p><input type="checkbox"/> Theater Style (Chairs only)</p> 	<p><input type="checkbox"/> Board Meeting Style</p> 
<p><input type="checkbox"/> Meeting Style</p> 	<p><input type="checkbox"/> Custom Style (Please sketch)</p> <p>Please attach additional notes on Room set-up, if necessary.</p>

For Office Use Only

<p>Assigned Meeting Room:</p>	<p>Date / Time Available:</p> <p>Date / Time Set-up Complete and Ready:</p>
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Other Requested Special Services / Special Needs

Please describe time and details of requested. Note that Naturalist Activities and Water Front activities requiring a lifeguard are offered based on availability of Outdoor School staff. Please arrange these activities as far in advance as possible. Thank you!

Naturalist Activity	
Life Guard	
Campfire	
AV Equipment	
Extra Meeting Room (s)	

Disabled Access – Please list below any individual with a disability and/or special access needs that members of your group may have.

Other Health / Medical Conditions – Please list below any individual with know allergies that members of your group may have.

Other Special Needs – Please list below any additional special need that members of your group may have, so that we may do everything possible to provide assistance.

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Terms of Agreement

No reservation is guaranteed until a **signed contract and a 25% deposit** (or approved Purchase Order) are received.

If the number of participants should fall below the number guaranteed in the **30 Day Reservation Confirmation**, the Conference Group will be billed for the higher number. If you wish to increase you guaranteed number after the 30 Day Reservation Confirmation is submitted, this will be done on the basis of space availability and no less than one week before your arrival.

A Summary of Guests Special Needs and Program Agenda must be provided to Walker Creek Ranch 30 days prior to the conference and should be attached to this agreement.

An Estimate of Final Bill will be calculated, based on the information provided in this 30 Day Reservation Confirmation. The balance due, as shown on the Estimate of Final Bill is due and payable upon your arrival. No payments will be accepted from individual participants. There are no adjustments for late arrivals, early departures, unused rooms, or meals not taken. Please make check payable to the Marin County Office of Education / Walker Creek Ranch.

An hourly surcharge of \$100.00 will be applied if a group remains beyond the agreed upon departure time.

Any damages or losses to Walker Creek Ranch or unauthorized use of buildings will result in additional charges.

Payment for all additional charges must be made within thirty (30) days of billing date. A 1.5% monthly charge will be applied to overdue balances.

Billing will be based on the information included in this document, or on the actual group size and services rendered, whichever is greater.

Conditions of Use

Walker Creek Ranch is a public facility owned and operated by the Marin County Office of Education. All groups that enter into this contract must agree to the following conditions:

1. Controlled and illegal substances, firearms and weapons of any kind are forbidden at Walker Creek Ranch.
2. Alcoholic beverages and tobacco products are not allowed in the presence of students participating in school-related activities.
3. No public nudity.
4. No pets allowed. Guide dogs are allowed.
5. All Federal, State and Local laws and regulations will be observed.

In signing this agreement, the designated group leader of the Conference Group agrees to the above terms and assumes responsibility for the payment.

Please retain a copy of this document for your records.

Agency Representative (Date)

Walker Creek Ranch (Date)

For office use only:

Group: _____ Dates: _____