

EVENT: *ABC Company Seminar*

RESPONSIBLE PERSON: John Doe

ARRIVAL DATE/TIME: June 1, 2010 9:00 a.m.

PHONE NUMBER: xxx-xxx-xxxx

DEPARTURE DATE/TIME: June 1, 2010 1:00 p.m.

E-MAIL ADDRESS:

NO. OF PARTICIPANTS: 75

FAX NUMBER:

BILLING ADDRESS: John Doe Inc.
ABC Company
123 Anywhere Street
Jackson, MS 39202

Conference Services: 10-408CSE-451201

FACILITIES	NUMBER OF PARTICIPANTS	NUMBER OF DAYS/NIGHTS	PRICE PER DAY/NIGHT	TOTAL
Barber Auditorium		1	\$ 250.00	\$ 250.00
ESTIMATED COST OF FACILITIES				\$ 250.00
TOTAL				\$ 250.00

NON-REFUNDABLE DEPOSIT \$ 100.00 DUE ON OR BEFORE April 1, 2010
 CERTIFICATE OF LIABILITY INSURANCE DUE ON OR BEFORE April 1, 2010

Failure to provide proof of liability insurance may result in cancellation of this event.

BALANCE OF PAYMENT \$ 150.00 DUE UPON RECEIPT OF FINAL STATEMENT

BELHAVEN CONTACT: Coordinator of Conference Rentals

PHONE NUMBER: 601.968-8967

The above stated arrangements are acceptable. If additional facilities or special provisions are requested, this contract will be amended. I understand that the payments must be received by Belhaven University as listed above to guarantee my reservation.

I also understand that I will be responsible for any damages or repairs necessary as a result of this event and will be billed at replacement or repair cost. An itemized statement to this effect will be sent following the event and will be due upon receipt.

Accepted: _____
(Name of Organization)

Date: _____

Confirmed: _____
Assistant Vice President, Campus Operations

Date: _____

injury or death of any one person, and for not less than Twenty-Five Thousand and No/100 Dollars (\$25,000.00) with respect to destruction or damage to property. A liability policy or a certificate of insurance covering Client and University, as their interest may appear, but otherwise in the form herein provided, shall be deemed a compliance with the provisions of this paragraph. Failure to provide proof of liability insurance may result in cancellation of Client's event.

- J University is not responsible for personal injury, loss or damage to property or belongings of participants.
- L Alcoholic beverages and non prescription drugs are not allowed on campus.
- M University is a tobacco-free campus, therefore the use of tobacco in any form is prohibited on campus.
- N Client will dispose of all trash in trash containers.

PRINT NAME: _____ SIGNATURE: _____

ORGANIZATION: _____ DATE: _____