



The Regency Inn
4045 East Van Buren
Eureka Springs, AR 72632
PHONE-(479) 253-5959 FAX-(479)253-6019

Thank you for selecting the The Regency Inn Motel of Eureka Springs, AR for your upcoming lodging needs. Subject to receipt of this signed contract, initial deposit, and availability, we are pleased to confirm the date of the following arrangements as definite.

Group Name		Contact Person	
Phone Number		Fax Number	
Address		CC #	
City, State, ZIP		Exp: 3 digits sec code	
Arrival Date		Departure Date	
Room Types	1 Queen Bed Smk Non	2- Full Beds Smk Non	Check in – 02:00 PM Check out – 11:00 AM

Stay & Play- 1 night Total Experience- 1 night Three Days & Two Nights --2 nights

1 night lodging	1 night lodging	2 nights lodging
Passion Play tickets	Play, holy tour, museums, art center, parables of potter, statue of Christ	Play, holy tour, museums, art center, statue parables of potter, Music show
Continental breakfast	Continental breakfast	continental breakfast
# RMS with 2 people/room	@ \$	Per person X # of people = \$
# RMS with 3 people / room	@ \$	Per person X # of people = \$
# RMS with 4 people /room	@ \$	Per person X # of people = \$
CHILDREN (AGE 4-11)	@ \$	Per child X # of people = \$
Total Rooms	Total people	TOTAL with TAX = \$

VERY IMPORTANT INFORMATION, PLEASE CAREFULLY REVIEW AND SIGN BY 'X'

Children's rate is valid only when accompanied by two adults paying the double occupancy rate. Contact person is responsible for all payments, orderly conduct, and charges incurred by group members. Quoted rates reflect a group rate; any other discounts or offers do not apply. To book rooms, a signed copy of this contract along with a \$100 **non refundable** deposit is required. Any changes in arrival date, number of people, number of rooms, length of stay, etc. may change your rate. Bookings are automatically canceled if the deposits do not arrive by the due date. PLEASE, NO PETS ON PREMISES and NO SMOKING in a non-smoking room. There is a \$100 penalty for each violation. Please review the following cancellation section carefully. Ground floor rooms **ARE NOT** guaranteed.

CANCELLATION – charges are calculated using the following format. Numbers of days are from the day of arrival.

31 or more days--- \$100.00 Administrative fee is charged.	19- 10 days --- \$ 100.00 admin + 40 % of room cost is charged.
30-25 days --- \$100.00 fee + 25% of room cost is charged	09 – 07 days ----- \$100.00 Admin + 50% of room cost is charged.
24-20 days -- \$ 100.00 fee + 30 % of room cost is charged.	06-01 days & NO SHOW ---- Liable for Total room cost, Hotel's discretion

I / we, have read, fully understand and agree to above rules and terms and agree to pay the innkeeper for all charges including cancellation charges as mentioned above. **X:** _____

Deposit Date:	1 st \$100 booking fee: ASAP	Received - _____ TRAN # _____ CHK # _____	Cancellation Date: <u>see cancellation section above</u>	
	2 nd deposit: _____ (50 %) – Must arrive 45 days prior to arrival		Balance due on arrival: \$ _____ (cash, CC or bank check)	Balance Received _____ Tran # _____ Chk # _____ Cash _____
2 nd Deposit amount: \$ _____	Received - _____ Tran # _____ CHK # _____			

NOTE: It is customary in our industry to send out quotes and contracts to all interested parties. First one to send deposit will be booked and all subsequently received contracts will be booked based on availability or we will return your deposit.

ACCEPTANCE: I have read, understand, and agree to the aforementioned terms and conditions of this contract and now consider our function definite. I/We agree to pay the lodging operator for all charges as mentioned above.

Signature _____ Date _____ Print Name: _____

Office use only