

FACT SHEET AND BILLING INFORMATION

In order to expedite the billing for your upcoming function, please fill out the following questionnaire and return to the attention of the Sales Department.

Group Name _____

Arrival Date: _____ Departure Date: _____

Type of Function: _____

Is your group Tax Exempt? Yes No (Please circle one)

If yes, what is your Tax ID # _____
(We will need a copy of your Tax Exempt Certificate)

Which of the following items will be charged to the Group's Master Account? (Please indicate with an "X".) Any items not checked are the responsibility of the individual attendee. Any unpaid individual charges will be added to your Group Master Bill.

- | | |
|--|--|
| <input type="checkbox"/> Charges for Catering & Meeting Room | <input type="checkbox"/> Marina (Dockage) |
| <input type="checkbox"/> Guest Rooms and Tax | <input type="checkbox"/> Greens Fees |
| <input type="checkbox"/> Guestroom High Speed Internet Access
(\$8.95 per room/day) | <input type="checkbox"/> Carts |
| <input type="checkbox"/> Restaurant and Room Service Charges | <input type="checkbox"/> Club Rentals |
| <input type="checkbox"/> Lounge | <input type="checkbox"/> Golf Course Food & Beverage |
| <input type="checkbox"/> Laundry | <input type="checkbox"/> Fishing |
| <input type="checkbox"/> Telephone (access charge for all out going calls) | <input type="checkbox"/> Chambermaid's Gratuity |
| <input type="checkbox"/> Pro Shop Misc. (Caps, Balls, etc.) | <input type="checkbox"/> Bellman's Gratuity |
| <input type="checkbox"/> 1887 Shops | |

How will the Group's Master Bill be paid?

By check or credit card at check out.
(Please complete the attached credit card authorization form if applicable)

Mail Master Bill to the following address:
(Please complete the attached direct bill application if applicable)

Attention: _____

Organization: _____

Address: _____

City, State, Zip Code: _____

Phone: _____ Fax: _____

Email: _____

Please include to the Master Account **All Charges** for the following attendees:

Your Group's on-site representative while here at the Lodge: _____

Your Group's VIP's: _____

Are there any special instructions pertaining to your group function, billing or attendees?

Authorized By: _____