| Pricing & Deposit |
|-------------------|
| Rental Price:     |
| Deposit:          |
|                   |

## The Inn at Shattuck-St. Mary's Event Registration Form

SPACE IS LIMITED. PLEASE RSVP EARLY

Pre-registration is required.

\*Please email your event timeline/schedule to event coordinator at least 2 weeks prior to event
\*Shattuck-St. Mary's campus is a smoke-free campus. Issues with smoking may result in partial loss of damage deposit

|   |  | Generaling             | formation  |  |                        |     |    |
|---|--|------------------------|--|--|------------------------|-----|----|
| Registrant's Full Company/                                | 'Organization Na                           | ame:                   |  |  |                        |     |    |
| First Name, Last Name:                                    |  |                        |  |  |                        |     |    |
| Credit Card Billing Address                               | :  |                        |  |  |                        |     |    |
| City, State, Zip:   |  |                        |  |  |                        |     |    |
| Phone:  | Fax:                                       | Em                     | ail:   |  |                        |     |    |
| Event Date/Time:  |  | Set                    | up Arrival Time:   |  |                        |     |    |
| Departure Date/Time:                                      |  | Est                    | imated Guest Co  | ount:  |                        |     |    |
| Contact Name:   |  | Pho                    | one:   |  |                        |     |    |
| Event Type:   |  |                        |  |  |                        |     |    |
| Are there other people you                                | ı authorize to m                           | ake purchases          | ? <b>Yes No</b> if ye                                    | s, name:                                     |                        |     |    |
| Overnight Suites Needed?                                  | Yes No                                     | ) # o                  | f rooms request  | ted:   |                        |     |    |
|   | atering services ar                        | e needed               | Alcoholic be   | verages (Ba                                  | ar) needed?            | Yes | No |
| Check here if ca  | :  |                        | Alcoholic be   | deposits are n                               |                        |     | No |
| Event Request or Notes                                    | :<br>I agree to all renta                  | l pricing, deposits. I | understand all event (                                   | deposits are n                               | on-refundable<br>Date: |     | No |
| Event Request or Notes Signature:                         | I agree to all renta                       | I pricing, deposits. I | understand all event of                                  | deposits are n<br>C                          | on-refundable<br>Date: |     | No |
| Event Request or Notes  Signature:  Deposit Payment Type: | :<br>I agree to all renta                  | l pricing, deposits. I | understand all event (                                   | deposits are n                               | on-refundable<br>Date: |     | No |
| Event Request or Notes Signature:                         | I agree to all renta  Credit Card Ai  Visa | I pricing, deposits. I | understand all event of<br>for deposits and<br>AmExpress | deposits are n<br>E<br>final billin<br>Check | on-refundable<br>Date: |     |    |