



**Holiday Inn Express Grand Rapids North**  
 358 River Ridge Dr NW ~ Walker MI 49544  
 P: 616-647-4100 \* F: 616-647-4101  
 www.hiexpress.com/grandrapidsnmi

**GROUP BOOKING CONTRACT**

Definite       Tentative       Revision

Organization / Group: 3rd Annual Winchester Run  
 Booking Contact: Ron Walter  
 Street Address:  
 City / State: Rockford, MI  
 Zip Code:

Corp ID / Group Code: AWR  
 On-Site Contact: Katie Griffes  
 Telephone: 616-318-0798  
 Fax:  
 E-Mail: [hd7mag@aol.com](mailto:hd7mag@aol.com)

**Total Rooms Reserved: 20**

**Arrival & Departure:**

Date	30-Jul-10	31-Jul-10		
Day	Friday	Saturday		
# Rooms	20	20		

Room Types Reserved	Quantity Blocked	Group Rate
Standard King	20	\$79.00 + Tax

Total Room Tax: 14%      Breakfast Hours: 6:00am-10:00am  
 Check-In Time: 3:00 PM      Pool/Whirlpool Hours: 7:00am - 11:00pm Daily  
 Check-Out Time: 12 Noon

Method of Reservations:     Individual Calls       Rooming List       Hold Under 1 Name

**Hotel is 100% Smoke Free**  
**If you have any questions or need to make any changes, please contact Kristin Carlson.**

<b>Billing Instructions:</b>	<input checked="" type="checkbox"/> Individual Pay Own	<input type="checkbox"/> Master Account	<input type="checkbox"/> Deposit Required
	<input checked="" type="checkbox"/> Room / Tax	<input type="checkbox"/> Room / Tax	Deposit Due Date: _____
	<input checked="" type="checkbox"/> Incidentals	<input type="checkbox"/> Incidentals	Deposit Amount Due: _____
<b>Method of Payment:</b>	<input type="checkbox"/> Cash	Amount Due: _____	
	<input type="checkbox"/> Direct Bill	Account Number: _____	
	<input type="checkbox"/> Company Check	Check Number: _____	
	<input type="checkbox"/> Pre-Paid	Amount Paid: _____	
	<input type="checkbox"/> Credit Card	Card # & Exp Date: _____	

**Signed Contract Due:**  
 A.S.A.P.

**Group Cut Off Date:**  
 Friday, July 09, 2010

*To guarantee rates quoted, availability of sleeping rooms and all other contract terms, a signed contract must be on file. To avoid forfeiture of any deposits paid or No Show charges, revisions or cancellations must be made by the signed contract due date. Please sign below acknowledging you have read this contract, hotel group booking policies listed on page two and the hotel Guest Courtesy Clause included. By signing this contract you are agreeing to all terms and conditions listed, as well as all hotel policies and procedures. It is also understood that any/all changes must be made directly through a sales representative of the Holiday Inn Express Grand Rapids North / Walker.*

*Ron Walter*  
 Guest Signature & Date

*Katie Griffes*  
 Hotel Contact Signature & Date - Kristin Carlson