***SALES MANAGER: Claire Gale***

***TITLE: Director of Sales***

Hilton Garden Inn Savannah Midtown

5711 Abercorn Street

Savannah, GA 31405

Tel. (912)652-9300

Fax: (912)652-9301

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| **GROUP SALES AGREEMENT- ROOMS ONLY** |

The following represents an agreement between the **Hilton Garden Inn Savannah Midtown** (“Hotel”) and **Georgia Coastal Aquatic Team** and outlines specific conditions and services to be provided.

ORGANIZATION: **Georgia Coastal Aquatic Team**

NAME OF EVENT: **Georgia Coastal Aquatic team**

OFFICIAL PROGRAM DATES: October 6- 7, 2017

CONTACT NAME: Kendal Wayner

JOB TITLE: Planner

ADDRESS: 7240 Sallie Mood Dr.

Savannah GA, 31406

PHONE NUMBER: (912) 656-5772

FAX NUMBER:

E-MAIL: ewayner1@comcast.net

**GUEST ROOM AND RATE COMMITM**

The Hotel agrees that it will provide, and **Georgia Coastal Aquatic Team** agrees that it will be responsible for utilizing, **40** room nights at the group rates in the pattern set forth below (such number and such pattern, the “Room Night Commitment”):

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| |  |  |  |  | | --- | --- | --- | --- | |  |  | **Standard Double Queen** | **Standard King** | | **Fri**  **10/6/2017** | **Guestrooms** | **10** | **10** | | **Rate** | **135.00** | **135.00** | | **Sat**  **10/7/2017** | **Guestrooms** | **10** | **10** | | **Rate** | **135.00** | **135.00** | |

***The Hotel room rates are subject to applicable Taxes (currently* 13% + $5 GA State Hotel/Motel Fee*) in effect at the time of check-in***

***Please be advised that the above rate does not include breakfast at the Hilton Garden Inn Savannah Midtown.***

The group room rates listed above are net non-commissionable. **Georgia Coastal Aquatic Team** will advise its designated agency(ies) of these rates and address any resulting agency compensation issues directly with the management of the appropriate agency.

**CONCESSIONS (OPTIONAL)**

**Georgia Coastal Aquatic Team** will be entitled to one (1) complimentary room night for every **30** revenue-generating room nights occupied on a cumulative basis. Complimentary guestrooms must be utilized during the event.

**METHOD OF RESERVATIONS**

**Individual Call-In:** By calling Hotel's toll free Reservation Line, **912-652-9300**, individuals can make their own reservations. For

individuals to receive the established Group rate, they must identify themselves as members of the **Georgia Coastal Aquatic team Group** initially when making the reservation. All reservations must be received by the group’s cut-off date. Reservations made after the cut-off date will be subject to availability and the most available rate.

**GUARANTEED RESERVATIONS**

All reservations must be accompanied by a first night room deposit or guaranteed with a major credit card or by **Georgia Coastal Aquatic Team.** Hotel will not hold any reservations unless secured by one of the above methods.

**CUT-OFF DATE**

Reservations by attendees must be received on or before **September 22, 2017.** At this Cut-Off Date, the Hotel will review the reservation pick up for the Event, release the unreserved rooms for general sale, and determine whether or not it can accept reservations based on a space- and rate-available basis at the group rate after this date. Release of rooms for general sale following the Cutoff Date does not affect **Georgia Coastal Aquatic Team’s** obligation, as discussed elsewhere in this Agreement, to utilize guest rooms.

**MASTER ACCOUNT**

Hotel must be notified in writing at least 10 days prior to arrival of the authorized signatories and the charges that are to be posted to the Master Account. Any cancellation or attrition fees will be billed to the Master Account.

**METHOD OF PAYMENT**

Credit Card

wishes to pay any portion of its obligation by credit card or company check, the attached **credit card authorization** form must be filled out, **signed, and returned** prior to execution of this Agreement to guarantee method of payment.

**SLEEPING ROOM BILLING INSTRUCTIONS:**

Please Check One Option:

Individuals responsible for all charges.

**ADJUSTMENTS TO CONCESSIONS**

**INDIVIDUAL CANCELLATION**

Individual room reservations may be canceled without penalty charges if notice is given prior to 3:00pm the day before arrival. If guest does not have a valid cancellation number prior to this time, guest may be subject to a cancellation charge of one night’s room and tax.

**IMPOSSIBILITY**

The performance of this Agreement is subject to termination without liability upon the occurrence of any circumstance beyond the control of either party – such as acts of God, war, acts of terrorism, government regulations, disaster, strikes (except those involving the employees or agents of the party seeking the protection of this clause), civil disorder, or curtailment of transportation facilities – to the extent that such circumstance makes it illegal or impossible to provide or use the Hotel facilities. The ability to terminate this Agreement without liability pursuant to this paragraph is conditioned upon delivery of written notice to the other party setting forth the basis for such termination as soon as reasonably practical - but in no event longer than ten (10) days - after learning of such basis.

**COMPLIANCE LAW**

This Agreement is subject to all applicable federal, provincial, and local laws, including health and safety codes, alcoholic beverage control laws, disability laws, federal anti-terrorism laws and regulations, and the like. Hotel and **Georgia Coastal Aquatic Team** agree to cooperate with each other to ensure compliance with such laws.

**LITIGATION EXPENSES**

The parties agree that, in the event litigation relating to this Agreement is filed by either party, the non-prevailing party in such litigation will pay the prevailing party’s costs resulting from the litigation, including reasonable attorneys’ fees.

**CHANGES, ADDITIONS, MODIFICATIONS TO THIS CONTRACT**

All changes, additions, deletions, or situations including corrective lining out by either the Hotel or **Georgia Coastal Aquatic Team** will not be considered agreed to or binding to the other unless such modifications have been initialed or otherwise approved in writing by the other.

**ACCEPTANCE**

Prior to execution by both parties, this document represents an offer by the Hotel. Unless the Hotel otherwise notifies **Georgia Coastal Aquatic Team** at any time prior to **Georgia Coastal Aquatic team’s** execution of this document, the outlined format and dates will be held by the Hotel for **Georgia Coastal Aquatic Team** on a first option basis until

**5:00 pm EST August 31,, 2017**

If **Georgia Coastal Aquatic Team** cannot make a commitment prior to that date, the offer will revert to a second option basis or, at the Hotel’s option, the arrangements will be released, in which case neither party will have any further obligations. Upon receipt by the Hotel of a fully executed version of this Agreement prior to  **August 31,, 2017**, or upon the Hotel’s acceptance of a fully executed version of this Agreement after such date, it will be placed on a definite basis and will be binding upon the Hotel and **Georgia Coastal Aquatic Team.**

The Hotel and **Georgia Coastal Aquatic Team** have agreed to and have executed this Agreement by their authorized representative as of the dates indicated below

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| --- | --- |
| **Approved And Authorized By:**  **Georgia Coastal Aquatic Team** | **Approved And Authorized By:**  **Hilton Garden Inn Savannah Midtown** |
| **By:**  Kendal Wayner | **By:** Claire Gale |
| **Title:** | **Title:** Director of Sales |
| **Signature:** | **Signature:** |
| **Date:** | **Date:** |