

Florida Thespians Hotel Request Form 2023

COMPLETE THE FOLLOWING AGREEMENT / HOTEL REQUEST & EMAIL TO ThespianHousing@gmail.com ONLY EMAILED FORMS ACCEPTED

Below is the agreed to letter of intent to secure rooms for the **Florida Thespians 2023 Event**.
The agreement below will be binding once it is **emailed to ThespianHousing@gmail.com**.

- Troupe/School will be notified in 7 business days of email receipt - by email, with info on the selected/awarded hotel/s. There may or may not be additional fees associated with your requests, for example: **Parking, Breakfast, Wi Fi**
- Troupe/School will receive an invoice from selected-awarded hotel 60 days in advance of arrival date and agrees to pay invoice 30 Days in advance of arrival date. Hotels that do not receive payments 30 days in advance of arrival date will release rooms back to general inventory.
- Troupe/School agrees to pay cancellation fees of 1st night room and tax for cancellations occurring within the 30 day window prior to the event start date.
- Troupe/School agrees to provide the **attached room list** to the hotel with their payment 30 Days in advance of event start date along with a copy of any applicable **tax exempt forms**. **Please do not send rooming lists to Housing Company.**

****School-Block Agreement & Room List Details ****

Date: _____

Incomplete forms WILL NOT be processed.

PLEASE PRINT or TYPE

Troupe / School Faculty Advisor Information (Main Contact)

Name: _____

School/Troupe Name: _____

Phone Number: _____

Fax Number: _____

Email Address: _____

Alternate Email Address: _____

Troupe/School Address 1: _____

Troupe/School Address 2: _____

City/State/Zip Code: _____

Troupe/School Accounts Payable Information

Name: _____

Email Address: _____

Phone Number: _____

Secondary Contact

Name/Position with School/Troupe: _____

Email Address: _____

Phone Number: _____

Additional Information: _____

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Select Your School / Troupe Hotel

Please Choose Three (3) Hotels *in order of preference from the Hotel list provided online*

*Once form is completed please follow the steps below to receive confirmation of selected hotel. Please specify any Room Type requests and if you would like to be placed on a Wait List for your first choice or room type if it is unavailable.

Hotel Selection # 1 *							
Hotel Name	Address	TUE 3/14/23	WED 3/15/23	THU 3/16/23	FRI 3/17/23	SAT 3/18/23	
							Enter # of Rooms Needed for Each Night

Special Requests (Including Room Type Requests, ADA): _____

Hotel Selection # 2 *							
Hotel Name	Address	TUE 3/14/23	WED 3/15/23	THU 3/16/23	FRI 3/17/23	SAT 3/18/23	
							Enter # of Rooms Needed for Each Night

Special Requests (Including Room Type Requests, ADA): _____

Hotel Selection # 3 *							
Hotel Name	Address	TUE 3/14/23	WED 3/15/23	THU 3/16/23	FRI 3/17/23	SAT 3/18/23	
							Enter # of Rooms Needed for Each Night

Special Requests (Including Room Type Requests, ADA): _____

Request a Non-Listed or Additional Hotel							
Hotel Name	Address	TUE 3/14/23	WED 3/15/23	THU 3/16/23	FRI 3/17/23	SAT 3/18/23	
							Enter # of Rooms Needed for Each Night

Main Contact/Troupe/School

To Do List

- Complete the attached forms
- Email Completed Hotel Request Forms to ThespianHousing@gmail.com
- You will receive the following via **“Email”** within 10 days of time of fax submission:
 - Acceptance Letter & Confirmation of Selected Hotel

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Important Information:

- FL Thespian Housing Help Line: 727-367-9505
- FL Thespian Housing Help Email: ThespianHousing@gmail.com

Main Contact/Troupe/School,

This print-out / email serves as a letter of agreement between **Main Contact/Troupe/School** and **Selected Hotel**.

Selected Hotel agrees to provide accommodations to **Troupe/School** as outlined below for the **Florida Thespians 2023 Event** for the selected dates within **3/14/2023**, departing on **3/19/2023**.

Main Contact/Troupe/School agrees to pay **Selected Hotel** 30 days in advance of event start date 100% of monies due as outlined below and adhere to all policies and procedures as outlined below.

PLEASE SEND A COPY OF YOUR SCHOOL'S TAX EXEMPT CERTIFICATE WITH FULL PAYMENT AND ROOMING LIST TO HOTEL 30 DAYS PRIOR TO EVENT START DATE. PLEASE DO NOT SEND ROOMING LIST TO HOUSING COMPANY.

This letter is a binding agreement between the **Main Contact/Troupe/School** and the **Selected Hotel** as stated above.

- ❖ **Room Type:**
All rooms will accommodate 4 persons *unless other wise noted in the Hotel availability list.
**In some cases rooms will accommodate more or less than 4 persons*
- ❖ **Room Rate:**
Room rate is subject to the following: currently **16.5%** tax plus incidentals
(Tax is Subject to Change) If your organization is not subject to "State Tax" please provide Tax Certificate with payment. Room rate may be subject to Downtown Tampa Tourist Development Tax of \$1.50 per room per night.
- ❖ **Guest Room Cut-off Date:**
Final Room Count is due and considered final on **02/13/2023 / 30 days prior to event Start Date**. Hotel reserves the right to charge organization 1st. night room and tax for all rooms cancelled after this date. Under this agreement the hotel is not required to uphold the cancellation policies offered to other groups, individuals, contract or transient business. The **Main Contact/Troupe/School** understands and agrees that the hotel's normal cancellation policies and penalties may or may not be enforced and any fees or penalties due to a cancellation/s after the cut off date are solely at the hotel's discretion.
- ❖ **Billing:**
Cashiers Check or School Check sent to **Selected Hotel** by **Main Contact/Troupe/School** before **02/13/2023 – 30 Days prior to Event Start Date**. If payment in full is not received by this date all rooms "may" be released back into the general block for consumption of other groups. If rooms are released and not sold The Troupe/School understands and agrees the hotel reserves the right to collect payment in full for damages on unsold rooms from Troupes/Schools agreed to Hotel Request Form.

Policies & Procedures

The following is required for the School-Block as referenced above to be and remain secured – if the following is not upheld by the **Main Contact/Troupe/School** the School-Block "May" be released. If rooms are released and not sold, the **Main Contact/Troupe/School** understands and agrees the hotel reserves the right to collect payment in full for financial damages on unsold rooms for Troupes/Schools inability to satisfy the agreed to room count set forth in the School-Block.

Tax Exempt Form

Main Contact/Troupe/School must **MAIL FAX or EMAIL COPY TO HOTEL WITH FULL PAYMENT**.

Main Contact/Troupe/School agrees to Send this document in conjunction with the **Hotel Payment** and completed **Room List**.
Please do not send rooming list to Housing Company.

Room List - Required

Room List must be initially completed by **2/13/2023** 30 days prior to event Start Date.

Main Contact/Troupe/School will enter these names in the **provided form below** and will be able to update these names directly with the hotel until **03/06/2023 (8 days) prior to event Start Date**. After this date all room list information and updates will be closed. **Please do not send rooming lists to Housing Company.**

Quantity of Rooms / Changing

Main Contact/Troupe/School will have the ability to update the number of desired rooms with out penalty in a School-Block until **2/13/2023** - 30 days prior to event Start Date. After this date School-Block Manager may alter quantity with the understanding that Hotel reserves the right to charge organization 1st. night room and tax for all rooms cancelled after this date. Under this agreement the hotel is not required to uphold the cancellation policies offered to other groups, individuals, contract or transient business. The

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Troupe/School understands and agrees that the hotel's normal cancellation policies and penalties may or may not be enforced and any fees or penalties due to a cancellation/s after the cut off date are solely at the hotel's discretion.

Agree to Payment Policies

Cashiers Check or School Check sent to **Selected Hotel** by **Main Contact/Troupe/School** before **02/13/2023 – 30 Days prior to Event Start Date**. If payment in full is not received by this date all rooms "may" be released back into the general block for consumption of other groups. If rooms are released and not sold The Troupe/School understands and agrees the hotel reserves the right to collect payment in full for damages on unsold rooms from Troupes/Schools agreed to Troupe/School Block.

Agree to Cancellation Policies and Associated Fees

Cancellations made within 30 days prior to Event Start Date are subject to a penalty equal to room and tax for the first night. No-Shows, Cancellations or Changes made on or after the day of scheduled arrival are subject to a 100% penalty. Early Check-Out is subject to 100% penalty equal to room and tax for that night or nights.

All reservations are considered CLOSED (14) days prior to the event start date.

No cancellations or changes will be processed or accepted after the 14th day prior to event start date.

Main Contact/Troupe/School agrees to pay in full the entire amount of reservation + tax and incidentals to hotel.

Room Preferences

Every effort will be made to accommodate the amenities and room type requests. The majority of the contracted rooms are double/doubles, non-smoking. In most cases your room will legally accommodate a minimum of four (4) persons unless other wise noted in the hotel availability list. It is further agreed the preferences you choose will be granted if available on a first come first served basis. There may or may not be additional fees associated with your requests, for example: **Parking, Breakfast, Wifi, Suites**.

It is understood that the **Selected Hotel** is under agreement with **Florida Thespians** to supply rooms for the **Florida Thespians 2023 Event**. The hotel is subject to the agreement with **Florida Thespians**.

The agreements above have been read in detail and agreed to by the **Main Contact/Troupe/School**.

The person below is an authorized representative of the Troupe and School and has agreed to all the information listed above and below:

Troupe / School Faculty Advisor (Main Contact/Authorized Signator)

Signature: _____ Date: _____

First Name: _____

Last Name: _____

Phone Number: _____

Fax Number: _____

Email Address: _____

Alt. Email Address: _____