



UC Davis Group Reservation

**HYATT
PLACE™**

Date					
Group Contact Name					
Organization	UC Davis				
Address	One Shields Ave.				
City	Davis	State	CA	Zip	95616
Phone		Fax			
E-Mail Address					

**Please complete information box above and or ensure that all data is correct.*

Group Name: _____
(This will be the name that your guests call in to reserve rooms if a rooming list is not provide)

Client, (Client) and Hyatt Place – UC Davis (Hotel) agree as follows:

The Hotel agrees to hold the rooms listed in this group reservation form on a tentative basis for **three** business days from the date of this document (November 19, 2015). If this reservation request is not fully executed by Client and Hotel by this date, the Hotel will release all rooms being held.

GUEST ROOM BLOCK

Day				
Date				
Sleeping Rooms				

**Please initial to confirm that the above dates and number of rooms are correct _____*

GUEST ROOM RATES

The Hotel confirms the following guest room rates for both King and Double rooms:

\$000.00 (UC Davis or Special Discounted Rate)

- Room rates are quoted exclusive of applicable state and local taxes (which are currently 8% plus 5%) applicable service charges, or any other Hotel specific fees in effect at the hotel that may be incurred during accommodation.

RESERVATION METHOD (Please indicate / Initial to confirm)

- Guests will call hotel individually to make their reservations. (Individual Call In) _____
- Client will provide hotel with rooming list/ names of all guests. (Rooming List) _____

PAYMENT METHOD (Please indicate/ Initial to confirm)

- Guests will pay for all charges individually. _____
- Client agrees to pay for all guests' room and tax charges. _____
- Client agrees to be responsible for all guest charges. _____

**UC Davis will pay using a Purchase Order, credit card or by CTS process as described in master agreement between the parties.*

CUT-OFF DATE

The group "cut-off date" is XXXXXXXX.

By this date, all 'rooming list' group reservations **must** be confirmed by sending a rooming list and credit card for guarantee to the Hotel. On the cut-off date, all rooms that are not confirmed by way of the groups rooming list and held on the group credit card will be released into hotels general inventory for sale.

By this date, for 'individual call in' reservations, all group attendees **must** have called the hotel and made their respective reservations, confirming them with a credit card. On the cut-off date, all rooms that are not individually confirmed with attendees name and credit card will be released into Hotel's general inventory for sale.

Any additional reservation requests received after the cut-off date will be based on hotels general availability. All such reservations will be offered at Hotel's best available rate.

GROUP CHECK-IN AND CHECK-OUT TIMES

Hotel's check-in and check-out times are 3pm and 12 Noon respectively on the group's scheduled check-in and check-out dates. Hotel does not guarantee availability of any rooms outside these times. Any exceptions to this policy **MUST** be approved in writing by Hotel management.

***Children under 18 will not be allowed to check in to a room without a chaperone or guardian.**

GROUP CONDUCT POLICY

In order to ensure that all guests of the Hotel enjoy a comfortable and hassle-free stay, we require all groups to behave themselves in a courteous and respectable fashion at all times. Behaviors such as running in the hallways, knocking on doors, playing with the elevators, and any other behaviors that the hotel deems disruptive, noisy and inconsiderate to other hotel guests shall not be tolerated. The Hotel reserves the right to cancel any or all reservations of any group that does not abide to this or any other hotel policy. In any such event, no refunds shall be issued to the Client or any member of the group.

GROUP CANCELLATION

Either the Hotel or Client may cancel this reservation without cause upon written notice to the other party at any time prior to the events and at no penalty by the **cut-off-date**.

CHANGES NOTICE

Any changes to these terms must be made in writing and signed by both parties to be effective. Any modifications, additions or corrective lining out made on this agreement will not be binding unless such modifications have been signed or initialed by both parties.

BINDING AGREEMENT

This reservation and all of its terms are agreed upon by both parties. Any changes to these terms must be made in writing and signed by both parties to be effective. The terms and conditions of UC Davis master agreement A10034 (previously UCD1205231) shall take precedence if any dispute arises.

SIGNATURES

This signature page, once signed, may be sent back by electronic transmission (fax or scanned email) and shall be acceptable to the Hotel to hold the space. If the Hotel does not receive the Clients executed Reservation (with signature), within **3 business days** of November 19, 2015, Hotel will release all requested group rooms into Hotel's general inventory for sale.

In such an event that the Clients' rooms are released, on written request from Client, Hotel will send Client a new reservation based on available inventory and Hotel's best available group rate at that time.

When signed by representatives of both parties, this reservation, and the Terms and Conditions of UC Davis Master Agreement A10034 constitutes the full agreement between the Client and Hotel.

Client
Authorized Representative

Name: _____

Title: _____

Signature: _____

Date: _____

Hotel
Authorized Representative

Liz Read

Director of Sales

Signature: _____

Date: _____

*This reservation confirmation form has been reviewed and approved by UC Davis Contracting Services and UC Davis users may sign this form confirming details of their reservations with the hotel. All terms and conditions of A10034 are hereby incorporated by reference.

UC Davis Contracting Services Approved Form