

Anderson Lodge

SCHOOL DISTRICT RENTAL AGREEMENT

Client Name: _____ Address _____ _____ _____	Group Name: _____ Day phone: _____ Eve. Phone: _____ Cell: _____ Client Email: _____
Arrival date: _____ *Expected Arrival time: _____ ** (Check in is 4PM. Contact office if this is a conflict)	
Departure date: _____ *Expected Departure time: _____ ** (Check out is 1PM. Contact office if this is a conflict)	

** Overnight groups must call 360-247-6660 if they wish to request a different arrival or departure time.
 A fee may be charged for early check-in and late departure times

1. EXPECTED GROUP SIZE: Date ____ number ____, Date ____ number ____, Date ____ number ____, Date ____ number ____

Additional Guest Policy: All guests at Anderson Lodge are charged a fee. If you have anyone just coming up for the day, or part of a day, they are still considered a guest. Overnight, partial day and day use guests are charged the same. Groups are required to keep accurate counts of guests.

2. CATERING CHOICES:

- Anderson Lodge staff** provides the meals for your retreat
- Volunteers** (Unpaid people) provide the meals for your retreat \$30/day kitchen fee
- Outside caterer** provides some or all meals \$90/Day kitchen fee

(PLEASE ASK FOR OUTSIDE CATERING REQUEST FORM.)

Indicate choice: ANDERSON LODGE CATERING SELF CATERING (unpaid volunteers provide meals)
 OUTSIDE CATERER BOTH _____ - _____

Fill in chart as to how many students you have at each meal and age group

DATE	BREAKFAST		LUNCH		DINNER	
	Up to 12yrs	over 12yrs	Up to 12yrs	over 12 yrs	Up to 12yrs	over 12 yrs

An exact count of all meals requested must be given to the office 7 days prior to scheduled date. You are required to pay for this amount or a greater amount if additional guests are served. No reduction in catering costs is allowed in the last 7 days.

3. LODGING CHOICES: (Please initial all facilities you wish to rent) See "Price List" and "Reservation Policy"

- MAIN LODGE**
- Dalarna Cabin** (on Main Lodge site)
- HILLTOP HOUSE**
- Hälsingland Cabin** (on Hilltop House site)
- Jämtland Cabin** (on Hilltop House site)
- Småland Cabin** (on Hilltop House site)

4. CLEANING INFORMATION:

You may choose to do your own cleaning or have our staff clean after your stay. If you choose to do the cleaning, we provide the cleaning checklist and supplies. For those groups wanting to leave the cleaning to us, we ask that you help us out and complete some minor tasks that will allow our staff to thoroughly clean the lodge for the next group. Please put back all furniture you may have moved, wash dishes, put away dishes, supplies and equipment in their original locations, remove trash and straighten up beds. Please take home all personal items and food you may have brought with you. We keep a lost and found item for 30 days. Trash limit: 10 cans.

Please Check:

- Our group will clean the Lodge/Hilltop/cabins according to the checklist provided & have it ready for the next group.
- Our group prefers to have Anderson Lodge take care of the major cleaning and WE agree to wash all dishes, put back furniture, return all dishes, supplies & equipment to their proper locations, remove trash and straighten up beds.
- Cleaning fees: Main Lodge \$275; Dalarna Cabin \$25; Hilltop House \$200; Jämtland, Småland, Hälsingland Cabins \$15

Anderson Lodge

5. BEDDING RENTAL:

Most groups bring their own bedding, towels and pillows. If you are a group that would prefer to have us provide the bedding, please do your best to complete the following. You can notify the home office of the exact count one week before your date. Bedding sets include: Sheets, blanket, pillow(s) and towel(s) Designate number for size of beds:

① Bedding Set @\$12.00 each. ____ Twins ____ Doubles ② Extra towel ____ @ \$1.00 each ③ Extra pillow ____ @ \$1.00 ea.

CONTRACT

This form is the Anderson Lodge Contract Rental Agreement and should be read thoroughly. Please submit this contract, and your Initial Deposit to the Anderson Lodge Home Office., (**Main Lodge:** \$300/night, **Dalarna Cabin:** \$30/night, **Hilltop House:** \$200/night. **3 cabins:** \$20/night/cabin) Your second deposit, the Confirmation Deposit, is due _____. (Call office for due date) Confirmation Deposit is the same dollar amount as the Initial Deposit and is required for booking. **Both deposits are non-refundable.** Checks payable to **Anderson Lodge**.

AGREEMENT:

- ▶ The applicant is responsible for any and all damage done to the facilities or property by any person who is a guest of applicant on the date/s of use. In the case of damage, please inform the Anderson Lodge office. Anderson Lodge will itemize the cost to repair said damage and applicant agrees to pay such statement within ten (10) days of receipt of the cost of repair.
- ▶ Anderson Lodge is not responsible or liable for loss of any property of any person who uses the facility on the date of use.
- ▶ Applicant agrees to hold Anderson Lodge harmless for any accident or injury that occurs while a guest at Anderson Lodge. It is each group's responsibility to provide medical and accident insurance for its participants.

USE AGREEMENT:

- ▶ Applicant is aware that no smoking is allowed and no pets are allowed in any building on any Anderson Lodge site and will inform all members of their group of this rule.
- ▶ Candles must be in fireproof or glass votive containers only. Container must exceed the height of the flame
- ▶ Applicant understands completely that the amount of \$_____per night deposit (initial plus confirmation deposits) is non-refundable and shall be applied to the rental fee.
- ▶ Applicant will keep their trash to a 10 can limit and remove and take back all (soda/beer cans, wine bottles & water bottles) and excess trash. A fee will be charged for excess trash removal.
- ▶ Applicant is responsible to pay 1/3 of the estimated catering cost, at least 60 days in advance. An exact catering count is due 7 days prior to your scheduled date and no reduction in cost will be made within that 7-day period.
- ▶ Applicant understands that our price sheet defining the lodging prices are subject to 9.6% tax. Services are subject to a 7.6% tax. Should a tax increase occur, client will be responsible for that increase.
- ▶ Applicant agrees to keep an accurate count of guests on a daily basis and report such count to the main office for billing.
- ▶ Applicant agrees to pay the final Anderson Lodge bill upon departure, unless prior arrangements have been made with the Anderson Lodge Office.

Applicant states that the above information is true and this is a firm reservation. The undersigned has the authority to sign this agreement.

2009-2010

Applicant signature: _____

Anderson Lodge
Accepted by: _____

Applicant printed name: _____

Date: _____

Date: _____

PLEASE RETURN TO: Anderson Lodge Home Office
18410 NE 399th ST
Amboy, WA 98601-3226

e-mail: lodge@andersonlodge.com
web site: www.andersonlodge.com
telephone: (360) 247-6660

Physical Address (not mailing address)

MAIN LODGE
12025 Lewis River Road
Ariel, WA 98603

Physical Address (not mailing address)

HILLTOP HOUSE
12014 Lewis River Road
Ariel, WA 98603