



GENESIS GROUP

2nd floor nunasi building | suite 201 5109 48th st. | yellowknife, nt | x1a 1n5
p. (867) 873-3456 | f. (867) 873-8311 | www.genesisgroup.ca

TRAINING CENTRE BOOKING SHEET

Group/Organization Name:

Mailing Address:

Event name:

Contact Name:

Phone:

Email:

Which room would you like to book? (please see rate sheet for room details)

Genesis Room (*If you are booking the Genesis Room, how would you like the seating arranged?*)

Lecture Hall Setup (36) Boardroom Setup (30) Horseshoe (24) Small Groups (40)

Other, please specify: _____

Meeting Room A

Meeting Room B

Dates requested:

Daily event start time:

Daily event end time:

Do you need to be let into the room early to setup materials, etc.? Yes No

If yes, what time?

Number in group using the room:

Do you require wheelchair access? Yes No **If yes, for how many people?**

Will you require the use of our audio visual equipment? Yes No

Teleconference Phone

Do you require any printing, copying or document preparation?

Name tags/tent cards Signage Document printing & preparation Multimedia support (PowerPoint or slideshow design)

Which of the following catering services will you require? (Please check boxes)

Water is complimentary.

Morning Refreshments

- None
- Coffee/tea
- Juice/pop
- Assorted pastries, donuts & muffins
- Fruit platter
- Veggie platter
- Coldcut/cheese & cracker platter
- Other:

Afternoon Refreshments

- None
- Coffee/tea
- Juice/pop
- Assorted pastries, donuts & muffins
- Fruit platter
- Veggie platter
- Coldcut/cheese & cracker platter
- Other:



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Would you like breakfast service? *(If so please ask to see menu?)*

Yes No

What time would you like breakfast served?

Lunch Service? *(If so please ask to see menu?)*

Yes No

What time would you like lunch served?

Special dietary requests?

At the Genesis Group we pride ourselves on putting the customer first. If there is something that you would like that is not listed here please let us know and we will do our very best to provide it for you.

Deposit

All room reservations require a non-refundable deposit of 50% of the total room booking fees (this does not include catering costs).

Please provided you're a credit card number for the deposit.

Credit card type: Visa / MasterCard

Card #: _____ **Exp. date:** _____

Name on card: _____

I approve Genesis Group to charge my credit card in the amount of: _____ (enter amount)

Card holder's signature: _____

Cancellation Policy

The Genesis Group charges a 50% non-refundable deposit to confirm all reservations.

All reservations under 5 days require at least 5 business days notice of cancellation. The remaining 50% of all rental fees will be charged to those who fail to provide adequate notice of cancellation.

All reservations of 5 to 15 days require cancellation notice of at least 10 business days. The remaining 50% of all rental fees will be charged to those who fail to provide adequate notice of cancellation.

All reservations over 15 days require at least the same number of days cancellation notice. (Example: A 30 day reservation requires 30 days cancellation notice.) The remaining 50% of all rental fees will be charged to those who fail to provide adequate notice of cancellation.

I agree to all terms and conditions.

Signature: _____ **Date:** _____

If you are completing this form electronically please type your name and the date above.