

Training Facility Contract

Full Day Room Rental

Full Day Room Rental - \$400.00

Half Day Rental

Half Day Rental - \$250

DVD Player

DVD Player - \$30.00

Wireless Lavalier Microphone

Wireless Lavalier Microphone - \$15.00

Wireless Handheld Microphone

Wireless Handheld Microphone - \$15.00

Flip Chart with Easel, Paper & Markers

Flip Chart with Easel, Paper & Markers - \$20.00

Catering Kitchen Use

Catering Kitchen Use - \$25.00

Coffee (includes cups, sugar, etc.)

Coffee (includes cups, sugar, etc.) - \$25.00

Total Price

Meeting Information

Meeting Name:

Start Date: *

End Date: *

Start Time: *

End Time: *

Number of Attendes *

Company Information

Company Name: *

Prefix (Optional):

First Name: *

Last Name: *

Credentials: *

Title: *

Email: *

Secondary Email: *

Work Phone: *

Street Address: *

City: *

State: *

Country *

Postal Code: *

Do you have dietary restrictions? *

Additional Notes: *

CANCELLATION AND REFUND POLICY:

IPHCA Training & Events:

Refunds are at the discretion of IPHCA.

"No Shows" are non-refundable.

Cancellations with less than 7 days notice are non-refundable.

Payment by check - mail check to:

Illinois Primary Health Care Association

Attention: IPHCA Training

500 S. Ninth St.

Springfield, IL 62701

IPHCA Facility Rental:

This policy is for the rental and use of the IPHCA Institute for Learning and all other equipment as provided in the Facility Rental Contract.

Deposit: A deposit of 50% of the estimated charges must be paid within seven (7) business days of confirmation of the facility rental. Failure to submit a deposit will result in cancellation of your rental.

Payment: The balance of the total charges is due within 30 days of date of invoice.

Cancellation: All cancellations must be made in writing and will be based on the following schedule of refunds: If notice of cancellation is provided at least five (5) business days prior to the rental, 50% of the deposit will be refunded. Day-of cancellations and no-shows will receive no refund.

Special Equipment: To ensure system compatibility and appropriate technical support, only IPHCA audiovisual equipment may be used unless previous arrangements have been made with IPHCA staff.

Liability & Insurance: Renter is responsible for any and all losses or damage to IPHCA property. IPHCA shall not be responsible for any equipment failures or delays beyond IPHCA's control. Renter's exclusive remedy for any inability or failure to perform by IPHCA is the return of any sums paid to IPHCA under the contract and in no event shall IPHCA's liability exceed any sums paid. In no event shall IPHCA be responsible for any indirect, special, consequential, incidental or punitive damages, or attorney's fees, under breach of contract or any other legal or equitable theory.

Agreement: This agreement shall be considered accepted once the Training Facility Contract has been submitted.

Phone: [\(217\) 541-7300](tel:(217)541-7300)

Office Hours:

Monday - Friday

8:30 a.m. - 5:00 p.m.

I agree to above billing terms.

Credit Card

Cardholder Name

Card Number

Expiration Date

Security Code

Signature

Please save and submit form to Emily Bensko at ebensko@iphca.org.