

Dear BOE members and Administrators,

I am writing to ask for approval of a overnight trip to Gatlinburg for the Girls High School Basketball Team.

The tournament is Dec 20-22 at the Rocky Mountain Sports Complex in Gatlinburg. The plan would be to stay at Glenstone Lodge as we have in the past because it is the closest (5 miles) hotel with the best deal and able to accommodate the team. Other hotels contacted were over a hour away. We would stay 2 nights the 20,21st and leave after our game on the 22nd. We have attended the tournament and stayed at for over 5 years.

In the past to save on cost players have rode to the tournament and games with their parents and all parents have went to the tournament. We all meet at the hotel and follow the games. Players whose parents may not attend can ride with a adult 21 and over on their transportation checkout list. We also offer to take a school van if needed.

To pay for the trip players have fundraised in previous years and we will schedule another if needed.

Thank you for your consideration.

Sincerely,

Coach Holly Roberts



GLENSTONE LODGE

Glenstone Lodge

Group Sales Agreement

Account Name: Gallatin County HS/Basketball
Arrival: Wednesday, December 20, 2023

Group Name: Gallatin Girls High School 2023
Departure: Friday, December 22, 2023

Contact Information

Group Contact: Holly Roberts
Title:
Address: 70 Wildcat Circle
Warsaw, KY 41095
Phone #: 859-991-4920
Email: holly.roberts@gallatin.kyschools.us

Property Contact: Sean Watts
Title: Sales Manager
Address: 504 Airport Rd
Gatlinburg, TN 37738
Phone #: 865-277-8614
Email: glenstonesales@glenstonelodge.com

Guestroom Requirements

	Occupancy	Wed Dec 20		Thu Dec 21	
		Rooms	Rate	Rooms	Rate
QQ2 Interior	Q	7	\$92.00	7	\$92.00

Method of Reservation

Reservations will be made by Rooming List.

Cutoff Date: Monday, November 20, 2023

ROOMING LIST BOOKING - CUT OFF 30 DAYS

Contract Terms

- **BLOCK CANCELLATIONS AND REFUNDS:** If cancellation of this booking becomes necessary to avoid forfeiture of any deposit paid, the hotel must receive written notification no later than 30 days prior to arrival. 60 days cancellation is required for larger groups with 30 or more sleeping rooms reserved per day.
- **ROOMING LIST:**
 - Limited cancellations to room list may be made 72 hours prior to the arrival date. Cancellations made to room list within 72 hours of the arrival date forfeits first night's room/tax.
The signed credit/debit card authorization form provided by group leader will be charged for the balances due on the above dates.
Rates are based upon up to four people per room. **Room block and rate will be honored until cut-off date of Monday, November 20, 2023 when the rooming list is due. After the cut-off date - the rate will be adjusted, and rooms will be based upon availability.**

Please sign and return this agreement with a deposit of \$350.00 by Thursday, August 24, 2023. Otherwise, quoted rates are not guaranteed and may be renegotiated.

Agreement of Parties

I agree to meet all terms and conditions as stated above.

Customer Signature

Date

Hotel Representative

Date



GLENSTONE

LODGE

PAYMENT POLICY

- Initial deposit for the amount indicated on the contract is due with signed contract within 2 weeks or on the date indicated on the contract. Payment is payable **ONLY** by check or credit card.
- Rooming List is due 30 days prior to arrival, the remaining balance of room charges on the Master Account are due twenty-one (21) business days prior to arrival. Payment is payable **ONLY** by check or credit card. You will receive an invoice with the balance due.
- The following methods may be used for deposits: Cashier's Check, Company, Organization, Church or Personal Checks and Credit Cards. **Only business checks (no personal checks) can be used for final payment. Checks must arrive in our office a minimum of 2 weeks prior to arrival.**
- Groups claiming tax exemption status must provide current **Tennessee** tax exempt certificate or letter from the federal government stating organization is tax exempt under the 501c3 section of the internal revenue code.
- Groups claiming tax exempt status must provide payment in the form of check or credit card in the name corresponding to the name indicated on the tax exempt certificate or 501c3 letter. **Cash is not an acceptable form of payment.**
- Changes to the Payment Policy must be approved by the General Manager of Glenstone Lodge.

I understand and agree to the payment policy as stated above.

Group Contact Signature

Date

School-Related Student Trip/Vehicle Request Form

SUBMIT THIS FORM TWO WEEKS PRIOR TO THE TRIP.

SCHOOL GCHS FACULTY MEMBER(S) SPONSORING TRIP HOLLY
ROBERTS

- ☐ Classroom Field Trip ☐ Class Trip, specify _____
☐ Organization/Club Trip, specify _____ ☐ Other (athletic, band, if applicable)

Destination Rocky Mountain Sports Complex Gatlinburg, TN _____

Address 1870 Sports World Blvd Gatlinburg, TN 37738 Phone 865-325-0044

- ☐ Out of State ☐ Out of County ☐ Within County
☐ Overnight; give name, address, phone of lodging _____
GlenstoneLodge 504 Airport Rd Warsaw, KY 41095 Gatlinburg, TN 37738

Date of Request 8/13/23 Date of Trip 12 20-22Person Requesting Holly Roberts

Departure Time TBA 12/20 Return Time TBA Dec 22 Number of Riders 12
 Number of Chaperones 3 plus

ATTACH LIST OF NAMES OF ADULTS/STUDENTS ON TRIP

Faculty Sponsor Holly Roberts, Brenda Alexander, Dustin McVey, Linda Edmondson, parents
TBA
 (Certified Person Responsible for Student)

Principal Angie Lewis SBDM Chair

Charged to/Source of Funding Girls Basketball Fundraising Have all
 chaperones been approved? ☐ Yes ☐ No

Meals Required: ☐ Sack Lunch ☐ Fast Food ☐ Other Meals paid in fundraising
account

List Special Equipment To Be Transported—Items Which Cannot Be Held In Lap.

Number Of Buses Requested 0 Regular Bus _____ Special Needs Bus _____ Van
possibly 2 if a players parent does not go. In the past the parents have went and transported their child.

Ratio of Students to Adults

High School 20 to 1
 Middle School 10 to 1
 Elementary 5 to 1

For daily trips, a simple way to estimate cost is \$1/mile and \$20/hour, per bus.*This section to be completed by Transportation/Central Office.****Trip Calculation**

Bus _____ X \$1.00 = \$ _____ Mileage Bill to: _____
 Total Miles _____
 _____ X _____ = \$ _____ Driver Rate
 Avg. OT Rate = \$ _____ \$ _____ Total

of Buses Approved: _____ Approval of Transportation Director: _____ Date _____

Acceptance by Driver: _____ Date _____

For overnight and/or out-of-state trips, approval of the Superintendent and Board is required.

Superintendent

Date

Board Chairperson

Date

RELATED PROCEDURES:

09.36 AP.211, 09.36 AP.23

Review/Revised: 6/22/09