**Attachment 5**

**Submission Form for**

**Technical Proposal**

**(Full Service)**

1. Proposer’s name, address, telephone and fax numbers, email and federal tax identification number.

|  |  |
| --- | --- |
| Firm (Legal Name): |  |
| Address: |  |
| Address Line 2: |  |
| City, State, Zip code |  |
| Contact: |  |
| Title: |  |
| Phone Number: |  |
| Fax Number: |  |
| Email Address: |  |
| Web Site:  |  |
| Federal Tax ID Number: |  |

1. Estimated Meeting and Function Room Block:

 Propose Meeting and Function Rooms schedule, including the date, time, and a description of the set is detailed below. Please add the Function room name, square footage, noting dimensions, any odd shapes, angles, pillars and other salient characteristics). Enter “n/a” for any items that are not applicable.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  |  | **Day 1: Set up Only** **Tuesday, October 16 or Tuesday, November 13, 2012** |  |  |
| Day 1: Set up only 24 hour hold6:00 pm – 11:59 pm | Staff Office  | Conference or permanent board room table  | 6 |  |
| Day 1: Set up only 24 hour hold6:00 pm – 11:59 pm | Faculty Office  | Two rounds  | 10 |  |
| Day 1: Set up only 24 hour hold6:00 pm – 11:59 pm | AV Storage Room  | Empty  |  |  |
| Day 1: Set up only 24 hour hold6:00 pm – 11:59 pm | Registration  | Two classroom tables  |  |  |
| Day 1: Set up only 24 hour hold6:00 pm – 11:59 pm | General Session  | Rounds of 6 Head table for 3 – 6 (TBD)on Stage, (railing behind stage so guests can’t fall off, railing on steps) | 100  |  |
| Day 1: Set up only 24 hour hold6:00 pm – 11:59 pm | Breakout #1 | Crescent rounds of 5 | 35 |  |
| Day 1: Set up only 24 hour hold6:00 pm – 11:59 pm | Breakout #2 | Crescent rounds of 5 | 35 |  |
| Day 1: Set up only 24 hour hold6:00 pm – 11:59 pm | Breakout #3 | Crescent rounds of 5 | 35 |  |
| Day 1: Set up only 24 hour hold6:00 pm – 11:59 pm | Breakout #4 | Crescent rounds of 5 | 35 |  |
| **Day 2:** **Wednesday, October 17 or** **Wednesday, November 14****2012**  |
| Day 2: 24 hour hold  | Staff Office  | Conference or permanent board room table  | 6 |  |
| Day 2: 24 hour hold  | Faculty Office  | Two rounds  | 10 |  |
| Day 2: 24 hour hold  | AV Storage Room  | Empty  |  |  |
| Day 2: 7:00 a.m. – 5:00 p.m.24 hour hold  | Registration  | Two classroom tables  |  |  |
| Day 2: 8:30 a.m. – 5:00 p.m. 24 hour hold  | General Session  | Rounds of 6 Head table for 3 – 6 (TBD)on Stage, (railing behind stage so guests can’t fall off, railing on steps) | 100  |  |
| Day 2: 8:30 a.m. – 5:00 p.m. 24 hour hold  | Breakout #1 | Crescent rounds of 5 | 35 |  |
| Day 2: 8:30 a.m. – 5:00 p.m. 24 hour hold  | Breakout #2 | Crescent rounds of 5 | 35 |  |
| Day 2: 8:30 a.m. – 5:00 p.m. 24 hour hold  | Breakout #3 | Crescent rounds of 5 | 35 |  |
| Day 2: 8:30 a.m. – 5:00 p.m. 24 hour hold  | Breakout #4 | Crescent rounds of 5 | 35 |  |
| Day 2: 3:00 – 3:30 p.m..  | PM Break  | Ballroom Foyer  | 100  |  |
| **Day 3:** **Thursday, October 18 or** **Thursday, November 15****2012**  |
| Day 324 hour hold | Staff Office  | Conference or permanent board room table  | 6 |  |
| Day 324 hour hold | Faculty Office  | Two rounds  | 10 |  |
| Day 324 hour hold | AV Storage Room  | Empty  |  |  |
| Day 324 hour hold | Registration  | Two classroom tables  |  |  |
| Day 3: 8:30 a.m. – 5:00 p.m.24 hour hold  | General Session  | Rounds of 6 Head table for 3 – 6 (TBD)on Stage, (railing behind stage so guests can’t fall off, railing on steps) | 100  |  |
| Day 3: 8:30 a.m. – 5:00 p.m. 24 hour hold | Breakout #1 | Crescent rounds of 5 | 35 |  |
| Day 3: 8:30 a.m. – 5:00 p.m. 24 hour hold | Breakout #2 | Crescent rounds of 5 | 35 |  |
| Day 3: 8:30 a.m. – 5:00 p.m. 24 hour hold | Breakout #3 | Crescent rounds of 5 | 35 |  |
| Day 3: 8:30 a.m. – 5:00 p.m. 24 hour hold | Breakout #4 | Crescent rounds of 5 | 35 |  |
| Day 3: 7:00 a.m. – 8:30 a.m.  | Breakfast  | Rounds of 10  | 100  |  |
| Day 3: 10:00 – 10:30 a.m.  | AM Break  | Ballroom Foyer  | 100  |  |
| Day 3: 12:00 – 1:00 p.m.  | Lunch  | Rounds of 10 Speaker during lunch  | 100  |  |
| Day 3: 3:00 – 3:30 p.m.  | PM Break  | Ballroom Foyer  | 100  |  |
| **Day 4:** **Friday, October 19 or** **Friday, November 16****2012**  |
| Day 412:00 a.m. – 5 p.m. | Staff Office  | Conference or permanent board room table  | 6 |  |
| Day 412:00 a.m. – 5 p.m. | Faculty Office  | Two rounds  | 10 |  |
| Day 412:00 a.m. – 5 p.m.24 hour hold | AV Storage Room  | Empty  |  |  |
| Day 412:00 a.m. – 5 p.m. | Registration  | Two classroom tables  |  |  |
| Day 4: 8:30 a.m. – 5:00 p.m. | General Session  | Rounds of 6 Head table for 3 – 6 (TBD)on Stage, (railing behind stage so guests can’t fall off, railing on steps) | 100  |  |
| Day 4: 8:30 a.m. – 5:00 p.m.  | Breakout #1 | Crescent rounds of 5 | 35 |  |
| Day 4: 8:30 a.m. – 5:00 p.m.  | Breakout #2 | Crescent rounds of 5 | 35 |  |
| Day 4: 8:30 a.m. – 5:00 p.m. 24 hour hold | Breakout #3 | Crescent rounds of 5 | 35 |  |
| Day 4: 8:30 a.m. – 5:00 p.m.  | Breakout #4 | Crescent rounds of 5 | 35 |  |
| Day 4: 7:00 a.m. – 8:30 a.m.  | Breakfast  | Rounds of 10  | 100  |  |
| Day 4: 10:00 – 10:30 a.m.  | AM Break  | Ballroom Foyer  | 100  |  |

Are Meeting and Function Rooms compliant with American Disabilities Act (ADA)?

|  |  |
| --- | --- |
| Yes |  |
| No |  |

Can the Program use its own audio-visual equipment and labor at no additional charge?

|  |  |
| --- | --- |
| Yes |  |
| No |  |

 Please include an audio-visual price list sheet with this proposal for the Program.

1. Propose Sleeping Room schedule. Enter “n/a” for any items that are not applicable.

| Date | Type of Sleeping Room | Estimated Number of Sleeping Rooms | Confirm Number of Rooms able to provide |
| --- | --- | --- | --- |
| Day 1 10/16/12 Or 11/13/12 | Single/Double Occupancy | 5 |  |
| Day 2 10/17/12Or 11/14/12 | Single/Double Occupancy | 85 |  |
| Day 3 10/18/12Or 11/15/12 | Single/ Double Occupancy | 85 |  |
|  |  | 175 |  |

Are Sleeping rooms compliant with American Disabilities Act (ADA)?

|  |  |
| --- | --- |
| Yes |  |
| No |  |

1. Propose the cut-off date for reservations: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Propose Food and Beverage schedule, including specific menus provided for the unit price indicated on the Form for Submission of Cost Pricing.

| Type of Group Meal | Food and Beverage Menu |
| --- | --- |
| **Day 2 : Wednesday****10/17/12****Or** **11/14/12** |
| Breakfast Buffet  |  |
| AM Break |  |
| Lunch – Plated or Buffet. |  |
| **Day 3: Thursday****10/18/12****Or** **11/15/12** |
| Breakfast Buffet  |  |
| AM Break |  |
| Lunch Buffet –  |  |
| PM Break |  |
|  | **Day 4: Friday****10/19/12****Or** **11/16/12** |
| Breakfast Buffet  |  |
| AM Break |  |

 Are you able to provide Kosher Meals at the same price as the group rate?

|  |  |
| --- | --- |
| Yes |  |
| No |  |

 If No, What is the cost of Kosher Meals?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Please indicate where your Kosher Meals come from:

|  |
| --- |
|  |
|  |

1. Other Program Needs (identify if included in other proposed pricing):

| Item No. | Description | Approved (please note if approved) | Alternative  |
| --- | --- | --- | --- |
| 1. | Complimentary Registration area telephone |  |  |
| 2. | (10) Complimentary easels |  |  |
| 3. | (3) Complimentary Wired Internet for Registration and Staff Office |  |  |
| 4. | Staff Office and AV storage area on total lock out – complimentary lock out and keys for staff |  |  |
| 5. | Complimentary room policy – please indicate how many booked rooms will earn 1 complimentary room. |  |  |
| 6.  | (3) Complimentary parking for AV staff and OERS (security) |  |  |

1. Propose options for transportation to the hotel on public transportation

Discuss the various means of transportation to local airports.

|  |
| --- |
| Discuss the approximate distance from major freeways. |
|  |

**H. Signature (must be completed by proposer):**

|  |
| --- |
| Signed this \_\_\_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ , 20\_\_\_\_\_\_\_\_. |
| By: |  |  |  |
|  | Signature |  | Print Name |
| Title: |  |  |  |