

# Burke Williams

## Guest Services Department

### *group events*

Thank you for choosing Burke Williams for your special event.

Our group event associates look forward to helping you design your day, ensuring your visit is as enjoyable and care-free as possible.

In addition to scheduling your luxurious, relaxing treatments BW is pleased to provide a host of specialty services designed to make your event a success, such as email invitations and confirmations, printed itineraries for each guest in your party, a private host and concierge to usher you through your special celebration.

Please review and complete the following forms which will guide you through the booking process, providing us with all information needed to make your day extraordinary.

Upon completion return the reservation request to Group Events via fax at: 310-356-3811. All requests are subject to availability and we will do our best to accommodate all of your group's needs. You will be contacted via email within 72 hours to confirm your appointment requests. If you DO NOT receive an email, please contact Group Events at: [groupevents@burkewilliamsspa.com](mailto:groupevents@burkewilliamsspa.com)

We look forward to helping you celebrate your event: business, bridal, birthdays, or just a well deserved day of relaxation shared with friends.

Group Events Department  
[GroupEvents@burkewilliamsspa.com](mailto:GroupEvents@burkewilliamsspa.com)  
Tel: 310-651-9818  
Fax: 310-356-3811



\*All groups of 6 or more must be booked through Group Events to ensure the proper coordination of treatment schedules and to simplify the payment process. Your event coordinator endeavors to make your spa visit a wonderful experience and marks the occasion with extra special attention to detail, reserved exclusively for your group.

\*In an effort to ensure availability, you are advised to make your reservations at least 2 weeks in advance.

\*A credit card number and this signed agreement are required to secure reservations.

\*Minimum service charge per group member: \$105 (\$120 in Danville and San Francisco) An 18% gratuity will be added to all treatments.

\*There is a \$20 per guest service fee for all group events.

**\*No schedule or treatment changes will be allowed less than 72 hours prior to event and/or final confirmation has occurred. All group event payments must be finalized 48 hours in advance of event by credit card listed below or as submitted by individual group attendees using pre-pay form provided.**

\*Your credit card will be billed in the event of: no-show or for cancellation with less than 72 hours notice prior to scheduled time of service; for any services not pre-paid 48 hours before event; for any upgrades, add-ons or products selected on event day not paid for by event participants. In such cases charges shall include: cost of treatment(s) + 18% gratuity + fees + products.

\*All services are full price. We do not offer discounts.

\***Spa guests must be at least 18 years of age.** Those aged 16 and 17 are eligible to receive facial treatments and nail care only and must be accompanied, at all times, by their parent or legal guardian at least 25 years of age. Guests under the age of 18 may not enter or use the spa facilities.

\*An additional service charge may be added to any events requiring specialized services and/or accommodations.

\*No outside food, alcoholic beverages, photographic equipment or cell phones are permitted in the spa facilities.

\*We are not responsible for delays due to weather, traffic, construction, directions, or any other instances beyond our control.

**\*In order to maintain the relaxing and tranquil atmosphere of our spa, talking is permitted in the lobby or lounge areas only. Talking is not allowed in any area of the spa. Cellphones and other electronic devices are prohibited.**

**I accept the terms and conditions outlined above and the responsibility of informing members of my group:** \_\_\_\_\_  
initial here

Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Credit Card #: \_\_\_\_\_ Expiration: \_\_\_\_\_ CVV: \_\_\_\_\_

Name as it appears on card: \_\_\_\_\_

Billing Address: \_\_\_\_\_

City: \_\_\_\_\_ St: \_\_\_\_\_ zip: \_\_\_\_\_ Tel: \_\_\_\_\_

**Upon completion of the worksheet please fax to (310)356-3811. You will be contacted via e-mail within 72 hours to confirm your appointment requests. If you DO NOT receive an email, please contact Group Events at: [groupevents@burkewilliamsspa.com](mailto:groupevents@burkewilliamsspa.com)**

# Burke Williams Group Event Worksheet

Event Date: \_\_\_\_\_ Location: \_\_\_\_\_

Occasion?: circle one - **Baby** Bridal Birthday Graduation Corporate Other: \_\_\_\_\_

Contact Name (Group Leader): \_\_\_\_\_

Email: \_\_\_\_\_ Fax: \_\_\_\_\_

Tel: (\_\_\_\_\_) \_\_\_\_\_

Guest of honor's name (if applicable): \_\_\_\_\_

Preferred start time of treatments (on the hour): \_\_\_\_\_ AM / PM

NOTE: Treatments are booked on the hour, not on the half or quarter hour. Groups are advised to arrive one (1) hour prior to the start time of their treatments.

How would you prefer to pay for your services? Check one:

- Each guest will pay for their own service(s)
- One person will pay for all guests. (name of person paying): \_\_\_\_\_

Notes: \_\_\_\_\_

**Please note:** Various municipalities enforce ordinances requiring contact information be up to date and on record for guests utilizing spa facilities. **You must provide the information requested below for each guest in your party.** Be assured BW never sells nor shares guest's private information with any entity other than required by law.

Ms. Mrs. Mr.	Client Name and address <small>Please print clearly</small>	Telephone Number & eMail Address	Service / Treatment	Preferred therapist's gender? M / F / none



# Burke Williams Group Events - Pre-Pay Authorization

This form must be completed and returned to Burke Williams no later than 72 hours prior to your Group Event. All pre-pays must be successfully processed no later than 48 hours prior to your Group Event. Changes to Group Event appointments are not permitted within 48 hours of said Event. Cancellations made within 48 hours of your Group Event will be charged in-full for treatments, 18% gratuity and applicable group surcharge fees. This pre-pay authorization covers only the originally scheduled treatment, gratuity and applicable fees. Each guest shall be individually responsible for any additional treatments, upgrades, add-on's, enhancements, products or Gift Card purchases.

Please initial here to acknowledge acceptance of the terms stated above: \_\_\_\_\_

## Group Event Profile

Date of Event: \_\_\_\_\_

Spa location: \_\_\_\_\_

Host / Group Name: \_\_\_\_\_

Guest Name: \_\_\_\_\_

Contact Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_  
*Prepay confirmation will be sent via email within 48 hours*

Spa Treatment(s): \_\_\_\_\_  
\_\_\_\_\_

Please initial here to acknowledge and authorize  
18% gratuity will be added to each of my treatments: \_\_\_\_\_

## Credit Card

AMEX VISA MASTERCARD *please circle one*

Card #: \_\_\_\_\_

Exp. date: \_\_\_\_\_ CVV: \_\_\_\_\_

Cardholder: \_\_\_\_\_

Billing Address: \_\_\_\_\_  
\_\_\_\_\_

Signature: \_\_\_\_\_

## Group Event Fee: \$20 per person. Add to this transaction?

Yes, add fee to my charge.     No, my host will be paying the fee.     Other: \_\_\_\_\_

## Pre-pay Process

The Group Events Department will verify all appointment information based on the group itinerary submitted and confirmed by your host. If there is any conflict between the information you have provided and the information we have on file, you will be notified immediately so that all information can be updated and confirmed before the pre-pay is processed.

Once the pre-pay has been successfully processed and charged to your credit card you will receive a confirmation code via the email address you provided above. There will be check-out/payment notes applied to your appointment indicating that your payment has been successfully processed.

Please initial here to acknowledge understanding of the Pre-pay Process: \_\_\_\_\_

**Please FAX this completed form to Group Events: 310-356-3811**

Additional questions? email: [GroupEvents@BurkeWilliamsSpa.com](mailto:GroupEvents@BurkeWilliamsSpa.com)

## For BW Group Event Department Use Only:

Treatment(s): \_\_\_\_\_

Gratuity: \_\_\_\_\_

Fee: \_\_\_\_\_

Date Received: \_\_\_\_\_

Total amount charged to CC: \_\_\_\_\_

Date Processed/Completed: \_\_\_\_\_

Invoice #: \_\_\_\_\_

Processed by: \_\_\_\_\_

Pre-pay #: \_\_\_\_\_

All check-out notes have been applied to guest's appointment. \_\_\_\_\_