

Net Wholesale Group Tour Rates / Hotels & Inns

ATTRACTION/EVENT: _____

ADDRESS: _____

CITY/STATE/ZIP: _____

CONTACT/TITLE: _____ WEBSITE: _____

IN SEASON: PHONE: _____ FAX: _____ EMAIL: _____

OFF SEASON: PHONE: _____ CELL: _____ EMAIL: _____

The Maine Tour Connection (TMTC) is a full service, year round, wholesale tour operator selling and marketing your product in New England and Eastern Canada group tour packages. TMTC requests non-commissionable wholesale receptive rate @10% less than published tour or corporate rate.

SEASON DATES:	
-	
Single	\$ _____
Double	\$ _____
Triple	\$ _____
Quad	\$ _____

SEASON DATES:	
-	
Single	\$ _____
Double	\$ _____
Triple	\$ _____
Quad	\$ _____

SEASON DATES:	
-	
Single	\$ _____
Double	\$ _____
Triple	\$ _____
Quad	\$ _____

SEASON DATES:	
-	
Single	\$ _____
Double	\$ _____
Triple	\$ _____
Quad	\$ _____

Accessibility - Please be specific about your accommodations for people with disabilities and/or mobility issues. **i.e.** how many rooms are accessible? walk-in showers? shower seats? grab bars? Attach separate sheet if more space is needed.

Children free in room with adult up to what age: _____

Are the following items included in room rate? If not, please quote per person prices including tax and gratuity.

Breakfast Hours: Weekdays: ___ to ___ Weekends: ___ to ___

Welcome Reception Free \$ _____ - Includes: _____

Continental Breakfast Free \$ _____ - Includes: _____

Deluxe Continental Free \$ _____ - Includes: _____

Full Breakfast Plated Free \$ _____ - Includes: _____

Full Breakfast Buffet Free \$ _____ - Includes: _____

Luggage Handling Yes No \$ _____ p/bag

Cot Charges Yes No \$ _____ p/cot

Room Tax _____ % ___ Included

Elevator Yes No

Stairs to Breakfast? ___ Yes ___ No

Other Fees or Gratuities: _____

Group Meals: Luncheon \$ _____ Plated Dinner \$ _____ Buffet Dinner \$ _____ (attach menu options)

Please forward hotel/Inn brochure, applicable menus, directions and coach parking instructions, as well JPG image(s) for TMTC use.

TMTC requires min. block - 15-20 dbl/dbl + 5 single, non smoking rooms. TMTC requires a min. of one comp room per 15 rooms paid.

Driver Rate of 50% off single is required for all groups. TMTC requires two comp meals per group.

TMTC requests that deposits be waived. If deposit is applicable, due date/amount: _____

_____/_____

TMTC will release rooms 45 days prior.

TMTC will release space 30 days or more prior to arrival of group. Rooming lists provided 21-30 days in advance.

TMTC requests direct billing privileges. (Credit references furnished upon request.)

Please advise if alternative payment is needed, due date & amount: _____/_____

I agree to provide TMTC with the above rates and services thru 12/31/2026. Please sign and return a copy to TMTC and retain a copy for your records.

Signature/Title _____



Date _____