Attachment 5 RFP Title: *Primary Assignments Orientation* RFP Number: *ASU RFP EG-024* 

## Attachment 5 Submission Form for Technical Proposal (Full Service)

A. 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:	
Federal Tax ID Number:	
Web Site:	

## B. 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.

			Expected	Room Name
Time	Function	Set Up	Attendance	Sq. Footage
	S	unday, September 9, 201	2	
		Set up day		
5:00 p.m. – 24 hr hold	Staff Office	Conference	<mark>5</mark>	
5:00 p.m. – 24 hr hold	AV Storage	Empty Room		
5:00 p.m. – 24 hr hold	Faculty Office	Rounds of 7	<mark>14</mark>	
5:00 p.m. – 24 hr hold	<b>Registration desk</b>	(2) 6ft tables	<mark>100</mark>	
5:00 p.m. – 24 hr hold	Breakout #1	Crescent rds of 5, (1) head	<mark>35</mark>	
		table for 2, (1) schoolroom		
		table in back of room for 2		
5:00 p.m. – 24 hr hold	Breakout #2	Crescent rds of 5, (1) head	<mark>35</mark>	

Time	Function	Set Up	Expected Attendance	Room Name Sq. Footage
	~~~~~~~~~	table for 2, (1) schoolroom		- 0
		table in back of room for 2		
5:00 p.m. – 24 hr hold	Breakout #3	Crescent rds of 5, (1) head	<mark>35</mark>	
		table for 2, (1) schoolroom	_	
		table in back of room for 2		
5:00 p.m. – 24 hr hold	Breakout #4	Crescent rds of 5, (1) head	<mark>35</mark>	
		table for 2, (1) schoolroom		
		table in back of room for 2		
	Monday, Septen	iber 10th – Thursday, Se	ptember 13, 20	<mark>)12</mark>
24 hour hold	Staff Office	Conference	5	
24 hour hold	AV Storage	Empty Room		
24 hour hold	Faculty Office	Rounds of 7	<mark>14</mark>	
24 hour hold	Registration desk	<b>Registration (outside General</b>		
		Session Room)		
8:30 a.m. – 5:00 p.m.	Breakout #1	Crescent rds of 5, (1) head	<mark>35</mark>	
		table for 2, (1) schoolroom		
		table in back of room for 2		
8:30 a.m. – 5:00 p.m.	Breakout #2	Crescent rds of 5, (1) head	<mark>35</mark>	
		table for 2, (1) schoolroom		
		table in back of room for 2		
8:30 a.m. – 5:00 p.m.	Breakout #3	Crescent rds of 5, (1) head	<mark>35</mark>	
		table for 2, (1) schoolroom		
		table in back of room for 2		
8:30 a.m. – 5:00 p.m.	Breakout #4	Crescent rds of 5, (1) head	<mark>35</mark>	
		table for 2, (1) schoolroom		
		table in back of room for 2		
7:00 – 9:00 a.m.	Breakfast	Rounds	80 - 105	
10:00 – 10:30 a.m.	AM Break	Foyer	80 - 105	
11:30 a.m. – 1:30 p.m.	Lunch	Rounds	80 - 105	
<mark>3:00 – 3:30 p.m.</mark>	PM Break	Foyer	80 - 105	
		F <mark>riday, September 14, 20</mark> 1		
12:00 a.m. – 2:00 p.m.	Staff Office	Conference	<mark>5</mark>	
24 hour hold	AV Storage	Empty Room		
12:00 a.m. – 2:00 p.m.	Faculty Office	Rounds of 7	<mark>14</mark>	
12:00 a.m. – 2:00 p.m.	Registration desk	Registration (outside General Session Room)		
8:30 a.m. – 12:00 p.m.	Breakout #1	Crescent rds of 5, (1) head	35	
(12:00 – 2:00 p.m.		table for 2, (1) schoolroom		
AV strike)		table in back of room for 2		
8:30 a.m. – 12:00 p.m.	Breakout #2	Crescent rds of 5, (1) head	<mark>35</mark>	
(12:00 – 2:00 p.m.		table for 2, (1) schoolroom		
AV strike)		table in back of room for 2		
8:30 a.m. – 12:00 p.m.	Breakout #3	Crescent rds of 5, (1) head	<mark>35</mark>	
(12:00 – 2:00 p.m.		table for 2, (1) schoolroom		
AV strike)		table in back of room for 2		
8:30 a.m. – 12:00 p.m.	Breakout #4	Crescent rds of 5, (1) head	<mark>35</mark>	
(12:00 – 2:00 p.m.		table for 2, (1) schoolroom		
AV strike)		table in back of room for 2		
7:00 – 9:00 a.m.	<b>Breakfast</b>	Rounds	<mark>80</mark>	
7.00 <b>9.00 u.m</b> .				

Time	Function	Set Up	Expected Attendance	Room Name Sq. Footage
Saturday, September 15, 2012				
12:00 a.m. – 8:00 a.m. AV Storage Empty Room				

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.

C. Propose Sleeping Room schedule. Enter "n/a" for any items that are not applicable.

		Estimated	Confirm
	Type of	Number of	Number of
	Sleeping	Sleeping	Rooms able
Date	Room	Rooms	to provide
Sunday, Sept	Single/Double	<mark>90</mark>	
<mark>9, 2012</mark>	Occupancy		
Monday, Sept	Single/Double	<mark>90</mark>	
<mark>10, 2012</mark>	Occupancy		
Tuesday, Sept	Single/ Double	<mark>90</mark>	
<mark>11, 2012</mark>	Occupancy		
Wednesday,	Single/ Double	<mark>70</mark>	
Sept 12, 2012	Occupancy		
Thursday,	Single/ Double	<mark>70</mark>	
Sept 13, 2012	Occupancy		
Friday, Sept	Single/ Double	2	
<mark>14, 2012</mark>	Occupancy		
		<mark>412</mark>	

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

Yes	
No	

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

Attachment 5 RFP Title: *Primary Assignments Orientation* RFP Number: *ASU RFP EG-024* 

	Detailed Food and Beverage Menu
Type of Group Meal	Mandan Sant 10, 2012
Breakfast Buffet	Monday, Sept 10, 2012
Dicakiast Duffer	
AM Break	
Lunch – Plated and	
Buffet options	
PM Break	
Dural Cart De Cart	Tuesday, Sept 11, 2012
Breakfast Buffet	
AM Break	
Lunch – Plated and	
Buffet options	
PM Break	
	Wednesday, Sept 12, 2012
Breakfast Buffet	weunesuay, Sept 12, 2012
AM Break	
Lunch – Plated and	
<b>Buffet</b> options	
PM Break	
r w Dleak	
	Thursday, Sept 13, 2012

Attachment 5 RFP Title: *Primary Assignments Orientation* RFP Number: *ASU RFP EG-024* 

	Detailed Food and Beverage Menu
Type of Group Meal	-
Breakfast Buffet	
Lunch – Plated and	
Buffet options	
Duriet options	
AM Break	
PM Break	
	Evidor Cont 14 2012
	Friday, Sept 14, 2012
Breakfast Buffet	
AM Break	
Alvi Dicak	

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:

## F. 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.	(2) Complimentary Wired Internet for		
	Registration and Staff Office		
4.	Staff Office and AV storage area on total		

Item No.	Description	Approved (please note if approved)	Alternative
	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) comp parking for AV and Security (ERS)		
7.	Sleeping room group rate 2 days pre/post		
	program		

 G. 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:			