

new



# CLUBHOUSE<sup>®</sup>

HOTEL & SUITES

## Customer Referral PROGRAM

Referring new business to ClubHouse Hotel is truly a compliment and just one of the many ways that Guests contribute to our Company's success. We are now happy to reward your efforts with our **NEW Customer Referral Program!**

### GROUP ROOM BLOCKS:

A gift card of a 3% incentive will be paid on room revenues actualized, excluding taxes and fees. A maximum payment of \$300. Group room blocks must be a minimum of 10 guest rooms. *(See Terms and Conditions as listed below.)*

### NEGOTIATED ACCOUNTS FOR CORPORATE BUSINESS

A \$50.00 gift card will be awarded for each lead once the account has accumulated 50 room nights. A \$200.00 gift card will be awarded for each lead once the account has accumulated 300 room nights.

### Referral Opportunities

Here are just a few ideas of referral opportunities:

- You have a friend or family member that works for a company that plans meetings and travels for business
- Your clients, partners or other departments in your company travel for business
- You belong to an association that holds meetings and conferences throughout the year that utilize hotel and meeting rooms
- If YOU have any ideas—we would love to hear them!

### The Process

Fill out the Lead Referral Form on back or call Samantha Crick, Sales Manager at: 605-336-6620 or email at: [scrick@clubhouse-hotel.com](mailto:scrick@clubhouse-hotel.com)

### Terms and Conditions

Leads or referrals for business are defined as business not being actively solicited at the the ClubHouse Hotel & Suites. All leads must be documented on the Lead referral Form prior to the ClubHouse Hotel receiving lead information on potential business. The General Manager or Sales Manager at the ClubHouse Hotel must approve the acceptance of the referral by verifying the referral qualifies as a lead by signing off on the Lead Referral Form. A lead is considered contracted (a definite booking) and eligible for payment once the group is actualized and payment has been received by group. In the case of multiple referrals for one group/business submitted, the first received will receive the payout.

## ClubHouse Hotel & Suites

2320 S Louise Ave

Sioux Falls, SD 57106

Reservations:

605.361.8700

Fax: 605.361.5950

[siouxfalls.clubhouseinn.com](http://siouxfalls.clubhouseinn.com)

[scrick@clubhouse-hotel.com](mailto:scrick@clubhouse-hotel.com)

*Customer Referral*  
PROGRAM FORM



Date: \_\_\_\_\_  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/State: \_\_\_\_\_ Phone: \_\_\_\_\_  
Email: \_\_\_\_\_

Please complete as much as the following information you have available.

Group/Company Name : \_\_\_\_\_  
Contact Name: \_\_\_\_\_  
Contact Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/State: \_\_\_\_\_ Phone: \_\_\_\_\_  
Email: \_\_\_\_\_

Select one or both: Group Room Block or Negotiated Corporate Business

Dates Requested: \_\_\_\_\_ Alternate Dates: \_\_\_\_\_  
Comments: \_\_\_\_\_  
Meeting Space Needs: \_\_\_\_\_  
\_\_\_\_\_  
Additional Comments: \_\_\_\_\_

**Please email or fax completed form to: Email: [scrick@clubhouse-hotel.com](mailto:scrick@clubhouse-hotel.com) fax: (605) 361-5950**

General Manager/Sales Manager Approval: \_\_\_\_\_



Note: For the ClubHouse Hotel & Suites to fill out.

Date Contract Signed: \_\_\_\_\_  
Total Room Nights Actualized: \_\_\_\_\_  
General Manager Approval: \_\_\_\_\_  
Amount---referral fee: \_\_\_\_\_  
Date: \_\_\_\_\_