



Package and Freight Handling Information

Shipping Information

Packages should not arrive more than three to five days prior to the group or guest arrival. A storage fee of \$5 per day will apply if items are shipped earlier.

Labeling

All packages should be labeled as follows:

Name of Hotel Contact: **Mackenzie Hirit**
Name of Group and or On-site Contact: **Dana Easton**
Name and Date of Meeting: **ACA/ARL Sept 4-7, 2019**
C/O Sheraton Music City Hotel
777 McGavock Pike
Nashville, TN 37214
Box (es) _____ of _____

Shippers return address should include shipper's name, address and telephone number. The guest will be notified upon receipt of package.

- Charges are as follows:

Envelopes and small boxes under 5lbs.	\$2 per item
Boxes under 100lbs.	\$6 per item
Boxes over 100lbs.	\$12 per item
Hard case	\$10 per item
Pallet	\$75.00 each

Please follow these instructions for all outgoing group packages***

- Package all boxes and containers securely using acceptable shipping products. (The hotel does not provide packaging materials).
- Label all packages using either Fed Ex or UPS. If you are using Fed Ex Ground, you must contact the company directly for pick-up. (The hotel does not provide labels. Please use the LINK station in the main lobby to print labels online).
- Clearly stack all packages to be delivered and call guest services at "0" for pick-up. Or, coordinate with a banquet captain for assistance.
- Once a hotel employee has come to pick-up your packages, submit the completed tear-off-sheet located on the bottom of this form. You must wait for a hotel employee to take delivery of your packages before leaving.

*****The hotel is not liable for any packages left without following proper procedure*****

Name of Guest: _____ Date: _____

Number of Boxes: _____

Courier Service: _____

Sheraton Employee Name: _____



Sheraton Music City
 777 McGavock Pike
 Nashville, TN 37214
 Please fill out the Credit Card Authorization and refax to the
 following Number: Fax 615-231-1120

TO: _____

SALES/CATERING CREDIT CARD AUTHORIZATION/BILLING REQUEST

I, _____, authorize the Sheraton Music City to charge my credit card according to the details listed below. I guarantee full payment of the account as described below:

Name of Group: _____

Arrival Date: _____ Departure Date: _____

Billing to Include:

Credit Card Type: _____ Credit Card Expiration: _____

Credit Card Account Number: _____

Security Code: _____

Address of Cardholder: _____

City: _____ State/Province: _____

Zip/Postal Code: _____ Country: _____

Card Holders Name (As it appears on the card): _____

Contact Telephone Number: _____

Please Indicate charges that are guaranteed to this credit card:

Room and Tax Only: Restaurant:

Room & Tax & Incidentals: Room Service:

Meals: Bar Charges:

Phone Calls: Banquet Charges:

All Charges: Parking:

Miscellaneous: _____

Others (Please specify)

Signature: _____

Please provide a legible copy of the authorized credit card above, front and back, along with this credit card authorization form and a copy of a valid driver's license. Thank you

Disclaimer: the Sheraton Music City will contact you to confirm that the payment has been received