

Administrative Retreat, June 26 and 27, 2013, Harbourtowne Conference Center

List of Attendees:

David Goldfarb, Principal

Jennifer Glaser, Director of Student Services

Diego Wilson, Academy Administrator

Nancy Melnick, Director of Student Activities

Rod Spelman, Director of Community Activities

Anthony Terrell, Assistant Principal

Kristen Boehme, Assistant Principal

Jeremiah Caven, Assistant Principal

Maureen Keck, Assistant Principal

Paula Meoli, Assistant Principal

Good afternoon, all! This is my just-in-time (barely!) announcement about the retreat. Please be at Harbourtowne ready to begin no later than 9:30. For those of you using GPS, Harbourtowne's address is 9784 Martingham Drive, St. Michael's, MD 21663. (website: <http://www.harbourtowne.com/>)

My goals for the retreat are to build stronger relationships individually and collectively, examine our collective direction/work from 30,000' to enhance our understanding of our individual roles, and to have fun. The agenda for the retreat will be very loose in structure.

Wednesday

9:30-12:00	Identifying and examining "the big picture"
12:00-1:00	Lunch
1:00-3:30	Breaking down the "picture"
3:30-4:00	Break
4:00-5:00	"Leading Up" and "the big picture"
Evening	Sunset cruise & Dinner at the Crab Claw

Thursday

7:00-7:45	Breakfast
7:45-9:45	Carrying out "the big picture"
9:45-10:00	Break & Check out
10:00-12:00	Finalizing & Action Steps
12:00	Lunch in town
Post-lunch	Departure & Return home

I expect there will be plenty of debate, reflection, brainstorming, focusing and goal-setting through each of the stages.

What else do you need?...Bring your ideas, buckle up and have fun!

See you tomorrow morning!

The Crab Claw Restaurant

304 Burns St.
St. Michaels, MD. 21663
(410)745-2900

Wednesday, June 26, 2013 10:35 PM

Emp1: Jess Inv#: 0055344
Open: June 26, 2013 08:49 PM
Station: 2 Guest: 5 Tab: Major DR #9-2

Qty	Description	Price	Total
** DINE-IN **			
1	Shrimp Cocktail	10.95	10.95
1	Buffalo Wings	9.95	9.95
18	Med Crab Single	3.25	58.50
2	Broiled Crab Cake	25.95	51.90
	Crab Imperial	25.95	25.95
1	Cesar Salad	2.00	2.00
2	Hamburger	8.95	17.90
2	add American	0.50	1.00
2	A la Carte Vegetable	3.95	7.90
1	Stuffed New York Str	30.95	30.95
1	1 lb Lg Steamed Shri	25.00	25.00
1	Basket of Hush Puppi	7.95	7.95
3	Brownie Sundae	6.95	20.85
1	Vanilla Cheese Cake	6.00	6.00
1	Chocolate Cake	6.00	6.00
10	No Drink	0.00	0.00

Item Count: 45

Sub Total 70
Sales Tax 0

Total 70

MasterCard 301.79

MasterCard *****7205

MasterCard 301.79

Tip 42.71
Total 344.50

** Customers Copy **

Thank-you, Please Come Again!
The Crab Claw

FAIRFAX HIGH SCHOOL
FAIRFAX, VIRGINIA 22030

29123

Acct Nbr w/ Vendor	Vendor Name	Payment Number	Check Date	Check #	Check Amount
	HARBOURTOWNE	0012008	5/21/2013	29123	\$1,500.00
Vendor Invoice Number	Date	Fund	Fund Description		Fund Amount
4107	5/21/2013	52550-00-00	Educational Contingency-General Rev/Exp		\$1,500.00

52550-00-00 Educational Contingency-General Rev/Exp

\$1,500.00



SF4001-1

REORDER FROM YOUR LOCAL SAFEGUARD DISTRIBUTOR, IF UNKNOWN, CALL 800-523-2422

REORDER FROM YOUR LOCAL SAFEGUARD DISTRIBUTOR, IF UNKNOWN, CALL 800-523-2422

G2VLPC0010000 L96LC031529



Rooms Contract

Date: April 22, 2013
Sales Person: Jennie Perley Tracking Code: CORP

CONTRACT INFORMATION

CUSTOMER Fairfax High School FILE # 4107
CONTACT Dava Goldfarb
STREET 3501 Rebel Run CITY Fairfax STATE VA ZIP 22030
TELEPHONE # 703.219.2223 FAX # _____ IATA # _____
E-MAIL dmgoldfarb@fcps.edu

ROOMS	RATES
10 SINGLES @ \$	\$270.99
DOUBLES @ \$	<u>260.99</u>
SUITES @ \$	
10 TOTAL	

ARRIVAL AND DEPARTURE PATTERN		YEAR		2013	
DATE	6/27	6/28			
DAY	Wed	Thurs			
ROOMS	10	C/O			

ROOM TAX 10% PLUS OTHER APPLICABLE TAXES
ADDITIONAL INFORMATION:
*Complete Meeting Package: ~~\$270.99~~ per person per night
260.99

METHOD OF RESERVATIONS
 ROOMING LIST
 INDIVIDUAL

ROOMING LIST AND INDIVIDUAL RESERVATIONS RECEIVED AFTER May 27, 2013
WILL BE PROVIDED ON A SPACE AVAILABLE BASIS "CUT-OFF DATE"
NOTE: SEE PAGE 2 PARAGRAPH #7

FUNCTION FACILITIES COMMITMENTS

Date/Day	Function	Room/Attendance
Wednesday June 27, 2013	Arrival: Check In at 3pm Meeting Lunch & Dinner - Chef's Selection	Lobby Bayview
Thursday June 28, 2013	Breakfast - Chef's Selection Meeting Lunch - On Their Own Departure: Check Out at 11am	Bayview Lobby

*Package includes: waterfront sleeping room, general session meeting space with screen and flipchart, breakfast, lunch and dinner, continuous beverage service, AM & PM breaks, complimentary parking and WIFI

BILLING INSTRUCTIONS

<p>INDIVIDUAL PAY</p> <p><input type="checkbox"/> ROOMS / TAX</p> <p><input checked="" type="checkbox"/> INCIDENTALS (SPECIFY)</p>	<p>MASTER ACCOUNT</p> <p><input checked="" type="checkbox"/> ROOMS / TAX</p> <p><input type="checkbox"/> INCIDENTALS (SPECIFY)</p>	<p>METHOD OF PAYMENT OF MASTER ACCOUNT</p> <p><input type="checkbox"/> CASH <input type="checkbox"/> DIRECT BILL ** <input type="checkbox"/> PURCHASE ORDER **</p> <p><input type="checkbox"/> PREPAID <input type="checkbox"/> COMPANY CHECK **</p> <p>** FOR PAYMENT OTHER THAN CASH, PLEASE COMPLETE THE CREDIT APPLICATION</p> <p><input type="checkbox"/> CREDIT CARD TYPE _____ EXP. DATE _____</p> <p>CARDHOLDER NAME _____</p> <p>CREDITCARD NUMBER _____</p> <p>AUTHORIZED SIGNATURE _____</p>
<p>DEPOSIT <u>Signed contract and \$1,500.00 deposit</u></p>		

CONTRACT TERMS

To guarantee rates quoted, the availability of sleeping rooms requested and all other terms of this contract, the contract must be signed and returned with deposit to the hotel by: Tuesday, April 30, 2013. After that time the hotel reserves the right to sell the space to others.

If cancellation of this contract becomes necessary, to avoid forfeiture of any deposits paid or payment of penalties, the hotel must receive written notification by: Tuesday, April 30, 2013, the "cancellation date".

I have read the contract including the hotel's booking policies and procedures, printed on page 2, and constituting a part of this contract and agree to said terms and conditions. The individuals signing this contract on behalf of Harbortowne and the contracting customer hereby represent and warrant that they are empowered and duly authorized to bind their respective parties to this Contract.

ACCEPTED BY CUSTOMER [Signature] HOTEL REPRESENTATIVE: Cheryl W. Oyer
DATE 5/9/13 TITLE PRINCIPAL DATE 4/22/2013 TITLE Director of School

1. **ROOM RATES:** All rates quoted are based upon the customer's sleeping room requirements as outlined in the rooms contract. All rates are subject to Maryland State and local taxes. Should any governmental agency adjust these taxes or assess additional taxes to be in effect during the term of this contract, the same shall be added to such rates.
2. **CONTRACT AND DEPOSIT PAYMENT:** A conference reservation will be considered confirmed only after a countersigned copy of this contract and deposit is received by the Hotel within the time period specified. The specific deposit and payment terms are outlined in the contract. If any portion of the hotel charges are to be billed, prior credit approval must be obtained from the hotel.
3. **INCIDENTAL CHARGES:** All incidental charges must be paid by each group member prior to departure from the hotel unless otherwise stated in this contract.
4. **BILLING:** Enclosed is a Credit Application. All individual accounts not paid upon checkout will be transferred to the Master Account for guaranteed payment. The method of payment of the Master Account will be established upon approval of your credit. Any outstanding balance of the Master Account will be due and payable upon receipt of our invoice. If payment is not received within thirty (30) days, a finance charge of 1½% per month (18% annual rate) [or the maximum allowed by law, whichever is less,] will be added to the unpaid balance commencing on the invoice date. In the event your account is referred to our attorneys for collection purposes and activities, the customer will be responsible for reasonable attorney's fees in addition to all other charges and court costs.
5. **CHECK-IN/CHECK-OUT TIME:** Check-in time is 3:00 p.m. and check-out time is 11:00 a.m. During periods of high occupancy, group rooms may not be available upon arrival. Rooms will be made available for group check-in as soon as possible. We regret that we cannot guarantee location or style of sleeping rooms nor can we provide room numbers in advance of arrival. When notified in advance, we are able to provide luggage storage space for guests who arrive early or depart after the requested check-out time.
6. **ALTERNATIVE ACCOMODATIONS:** The Hotel reserves the right to accommodate the customer, or any part thereof, in another hotel as determined in the reasonable judgement of management for the duration of the customer's stay or any part thereof.
7. **RESERVATIONS CUT-OFF DATE:** It is understood that the customer will supply the Hotel with a Rooming List of those guests who will occupy the block of rooms indicated. In order to insure room availability and quoted rates, it is mandatory that the Hotel receive the customer's rooming list no later than the "Cut-Off Date" on page one, at which time any rooms not reserved revert back to the hotel for sale on a first come, first serve basis. The number of rooms reserved as of the above cut-off date will be considered guaranteed. This guarantee is not subject to reduction and charges will be made to the customer accordingly.

Upon receipt of rooming list, any cancellations, including "no shows" and/or early checkouts made thereafter will be charged to customer in full.
8. **CANCELLATION POLICY:** If a customer should cancel more than sixty (60) days prior to arrival date, the hotel will hold the deposit for a future booking. The customer will be liable for the payment of the total sleeping room block, meeting space, and/or package, reserved if the hotel is unable to resell the sleeping rooms, meeting space, and/or package after late cancellation sixty (60) days or less prior to arrival date or after "cancellation date," whichever is later. Deposit refunds are determined at the discretion of Hotel's Management.
9. **TAX EXEMPTION:** Provided a valid Maryland State Sales and Use Tax Exemption Certificate is presented, tax exemption status will be honored for valid charges for which the organization will remit payment directly to Harbortowne. Unless a valid certificate specifically stating exemption to Hotel Occupancy Tax is provided, Hotel Occupancy Tax will be charged for the rental of guest and meeting rooms. Copies of the Exemption Certificates must be forwarded to the hotel's Accounting Department prior to arrival date.
10. **DAMAGE:** Any damages caused or repairs made necessary to the function rooms or other public areas, equipment or furniture, as a result of the actions or activity of you or your guests, employees, invitees, independent contractors, or agents, will be the full responsibility of the customer.
11. **BANQUET/MEETING FACILITIES:** Banquet and meeting facilities will be assigned by the Hotel to accommodate the "Program Agenda" requested by the customer. The hotel may substitute equally acceptable alternate space within the Hotel, if it deems necessary, or if the number of guests deviates from the number originally intended.

Food and Beverage is not permitted to be brought into the Hotel's function rooms from outside the Hotel. If you are planning the service of alcoholic beverages, please be aware that our liquor license requires that beverages only be dispensed by our employees and bartenders. Alcoholic Beverage Service will be denied to those guests who appear to be intoxicated or are underage.

Please be advised that it is likely that sleeping room reductions will be accompanied by a reduction in the space allocated to your program.

Standard audio-visual equipment includes one of each item per fifty (50) attendees: overhead projector, screen, and flip chart with markers.
12. **GOLF:** Group golf reservations are subject to a fifteen (15) day guarantee. Deletions and cancellations must be received fifteen (15) days prior to your scheduled tee times to avoid cancellation charges. Deletions and cancellations received less than fifteen (15) days prior to the scheduled tee times (including golf no shows) will result in unused tee times being charged to customer in full.



FAIRFAX COUNTY PUBLIC SCHOOLS - RISK MANAGEMENT
GATEHOUSE ADMINISTRATION CENTER I
 8115 Gatehouse Road Falls Church, VA 22042-1203
 PHONE: (571) 423-3620 FAX: (571) 423-3657

TO: Melissa Courtney AT: Fairfax HS
 CONTRACT WITH: Harbortown
 DATE REVIEWED: 4/29/13 DATE OF SERVICE: 6/27/13

- The attached contract has been reviewed (from an insurance and risk management perspective). **No modifications are required.**
- The attached contract has been reviewed (from an insurance and risk management perspective and **modifications are required** (the recommended modifications are made to the original document, initialed and dated in the margin).
- Please forward this document to the Office of **Instructional Services** for review.
- Before principal's signature, criminal certification form must be signed by vendor and attached to the contract. Send a copy of the signed criminal certification form to Risk Management.
- Provide to the vendor the attached **FCPS Statement of Insurance/Self-Insurance.**
- Please follow procurement guidelines

Comments: _____

IMPORTANT NOTICES:

FCPS cannot be responsible for reimbursement to parents/students for money submitted as "advance payment" (e.g., Broadway shows, transportation, hotels, camps) for any field trip that FCPS cancels. It is strongly recommended that contracts with stated refund/non-refund polices be given to parents BEFORE any permissions are signed or payments are made.

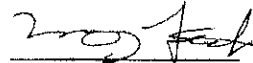
If a contract is associated with an unusual field trip, the trip request is due in Risk Management four (4) weeks prior to the date of the trip. All field trips must be reviewed and approved through the appropriate process, outlined in the current versions of Notice & Regulation 5790.

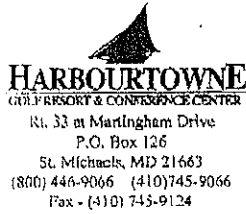
IMPORTANT DISCLAIMERS:

This contract was reviewed for the language within the contract to protect the assets of FCPS, **NOT** to assure the 'best financial deal' for the school.

A completed contract review does not translate to an approval/endorsement of the activity/event, the payment term/process, or the vendor; nor is it the guarantee of any promised goods or services. The review of this contract should **NOT** be interpreted that a related field trip or other student activity will be automatically approved.

This communication may contain information that is privileged, confidential, and exempt from disclosure under applicable law. It should be seen only by the person to whom it is sent. If the reader is not the intended recipient, you are hereby notified that any dissemination, distribution, or copying of this communication is strictly prohibited.


 RM Coordinator



Rooms Contract

Date: April 22, 2013
Sales Person: Jennie Perley Tracking Code: CORP

CONTRACT INFORMATION

CUSTOMER Fairfax High School FILE # 4107
CONTACT Dave Goldfarb
ADDRESS 3501 Rebel Run CITY Fairfax STATE VA ZIP 22030
TELEPHONE # 703.219.2223 FAX # _____ IATA # _____
EMAIL dmgoldfarb@cps.edu

ROOMS	RATES	ARRIVAL AND DEPARTURE PATTERN		YEAR	2013
10 SINGLES @ \$	\$278.99*	DATE	6/27	6/28	
DOUBLES @ \$		DAY	Wed	Thurs	
TRIPLES @ \$		ROOMS	10	C/O	
10 TRIPLES					

TAXES: 10% PLUS OTHER APPLICABLE TAXES
*Complete Meeting Package: \$279.99 per person per night
METHOD OF RESERVATIONS: ROOMING LIST INDIVIDUAL
ROOMING LIST AND INDIVIDUAL RESERVATIONS RECEIVED AFTER May 27, 2013
WILL BE PROVIDED ON A SPACE AVAILABLE BASIS "CUT-OFF DATE"
NOTE: SEE PAGE 2 PARAGRAPH #7

FUNCTIONS/FACILITIES/COMMITMENTS

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BILLING INSTRUCTIONS

INDIVIDUAL PAY: _____
MASTER ACCOUNT: ROOMS / TAX INCIDENTALS (SPECIFY) _____
METHOD OF PAYMENT OF MASTER ACCOUNT:
 CASH DIRECT BILL ** PURCHASE ORDER **
 PREPAID COMPANY CHECK **
** FOR PAYMENT OTHER THAN CASH, PLEASE COMPLETE THE CREDIT APPLICATION
 CREDIT CARD TYPE _____ EXP. DATE _____
CARDHOLDER NAME _____
CREDITCARD NUMBER _____
AUTHORIZED SIGNATURE _____

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CUSTOMER: _____ HOTEL REPRESENTATIVE: Cheryl W. Oesper
TITLE: _____ DATE: 4/22/2013 TITLE: Director of School

BOOKING POLICIES AND PROCEDURES

PAGE 1 of 2

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Acct Nbr w/ Vendor	Vendor Name	Payment Number	Check Date	Check #	Check Amount
	HARBOURTOWNE	0012268	8/6/2013	29368	\$1,109.90
Vendor Invoice Number	Date	Fund	Fund Description		Fund Amount
DB1331	8/6/2013	52550-00-00	Educational Contingency-General Rev/Exp		\$1,109.90


52550-00-00 Educational Contingency-General Rev/Exp

\$1,109.90

SF4001-1

TO REORDER, CALL YOUR LOCAL SAFEGUARD DISTRIBUTOR AT 800-222-0842

HW6HFD0010000 L96LC031529

 SAFEGUARD LITHO USA SFSL2 CK75081121

**HARBOURTOWNE
GOLF & CONFERENCE CENTER**

P.O. Box 126 • St. Michaels, MD 21663
(410) 745-9066
FED. TAX ID 52-1759272

INVOICE

FAIRFAX HIGH SCHOOL
3501 REBEL RUN
FAIRFAX, VA 22030
ATTN: DAVE GOLDFARB

Invoice Number	DB1331
	07/02/2013
	\$1,109.90
	6/26-6/27/13

CONFERENCE EXPENSES	\$2,609.90
LESS DEPOSIT	(\$1,500.00)
BALANCE DUE UPON RECEIPT	\$1,109.90

HARBOURTOWNE

GOLF RESORT & CONFERENCE CENTER

Cove Management Company

Enclosed is the invoice for your function held at Harbourtowne Resort. If you have any questions concerning this invoice, please contact either of the following persons in the accounting department:

Danette Hayden
410-745-9066, extension 2039
e-mail: dhayden@harbourtowne.com

Deborah Smith
410-745-9066, extension 2040
e-mail: dsmith@harbourtowne.com

If you wish to pay by credit card, please complete the enclosed credit card authorization form and fax to 410-745-9124.

Miles River and the Eastern Bay
P.O. Box 126, St. Michaels, Maryland 21663
(410) 745-9066
