

Vail Valley Lifestyle
Winter 2009 Concierge Checklist

Vail Valley Lifestyle is committed to making your stay in the Vail Valley as enjoyable as possible. In order for us to better understand your needs; please complete this concierge form providing us with as much information as possible. Please return this form 2 weeks prior to the service required to allow adequate time to complete the request. We will contact you to confirm your concierge needs and verify all information.

Our goal is to be available for you during your stay and return visits! In order to properly keep track of your preferences, we charge a one time \$45 set-up fee upon completing this form. We want to have your experience tailored to your needs!

Before completing the specific checklist, we would like to learn about you and your expectations. The more you share, the better we are able to guide you to an experience you will always remember! We are here for you!

1. Tell us about yourself! Are you a group of friends? Is this combined with a business trip? Is this a family trip and would you like children activities? Please elaborate: _____

2. What kind of experience would you like? For example: Are you looking for a more adventurous experience? Would you like to experience the outdoors at an enjoyable pace? Do you want your children with you, if so what are their ages?

3. What level of service do you prefer? Do you enjoy the finer things in life? Are you looking for the hidden treasures, lavish dinners and events? Or, would you like to enjoy the Vail Valley in a more cost effective method? Please let us know.

4. Are you looking for day excursions or activities to take several hours? Do you have a time frame?

5. Please let us know any other relevant information regarding your expectations, wishes, etc.

Now that we have a better understanding of your needs, please complete these additional details:

Customer Information

Name: _____
Best PhoneNumber: _____ EmailAddress: _____
Date range of service needed: _____
Where are you staying/ living: _____
How many people in your party: _____

Certain vendors require a credit card to book a reservation. ***This requirement is based on the cancellation policies that each enforces.***

Name (as it appears on card): _____
Card Number: _____ Expiration: _____ CCV#: _____
Billing Address: _____ City: _____ ST: _____ Zip: _____

Services Requested

1. Transportation – If required, please list dates and number of people. Do you prefer luxury vehicles, shuttle, taxi or rental car?

2. Lodging – If required, please answer the following:

Dates of your trip - _____
Number in party - _____
Preferred location in the Vail Valley - _____
How many bedrooms and baths do you prefer - _____
What is your nightly budget - _____
Are you interested in a condo, home or hotel - _____
Do you need any amenities on site or nearby - _____
Any other specific requirements - _____

3. Activities – The Vail Valley offers incredible activities. To view more details, visit:
<http://www.vailvalleylifestyle.com/vailvalleywinter.php>

Please circle the ones that interest you:

- 4 Eagle Ranch
- Hot air Balloon Rides
- Alpine Skiing
- Cross Country Skiing
- Dog Sledding
- Ice Climbing
- Ice Skating

Sledding and Tubing
Sleigh and Carriage Rides
Snow Cat Tours
Snowboarding
Snowmobiling
Snowshoeing
Telemark Skiing
Winter Fly Fishing

If you already have dates in mind for certain activities, please let us know.

4. Restaurants: The Vail Valley offers an extensive range of dining experiences. Whether you are looking for fine dining, casual or family friendly, we have it available! Go to: <http://www.vailvalleylifestyle.com/rewards-dine.php> for more details on restaurant choices.

What nights would you like to dine: _____
How many in your party: _____
What styles of food interest you: _____
What is your budget: _____
Do you require family friendly restaurants: _____
What locations do you want to stay within: _____
Do you have a vehicle or do you require transportation: _____
Any other Requirements: _____

6. Spa & Fitness Services – please circle one:

Fitness Center
Massage (length, therapist gender, treatment - *swedish, deep tissue*)
Nails
Hair
Skin Care – facials, make-up, wraps, etc.
Other – *please list*: _____

6. Grocery Delivery: Would you like groceries delivered to you on the day of your arrival or throughout your stay? _____ Date/Time to be delivered by: _____

If you are interested, please contact us for the grocery list.

7. Would you like to have a photographer/video available to photograph your activities? If so, please describe your requests:

8. Special Requests:

Thank you for taking the time to complete our form. We are looking forward to enhancing your stay!

Please know that every service provider and restaurant have their own policies and cancellation procedures. It is important for you to be familiar with each company policy. We want you to have a great time!

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