

BANQUET EVENT ORDER

Date:

CUSTOMER INFORMATION		EVENT INFORMATION	
Name: Dept: Bill Code: Phone Number:		Event Date: Description: Guest Count: Event Status: Contact Person:	
LOCATION AND TIMES			
Room	Setup Style	Start Time	End Time
Menu Selections			
Description	Quantity	Price	Total
Billing Summary			
Subtotal of Selection & Other Charges			
Total:			
Special Instructions			
Customer Signature & Date		Director of Catering & Date	

You will be billed for 100% of your guarantee or the expect number of guests, whichever is higher. Prices listed on this contract are based on information provided. Changes in total price may occur do to additional requests.