

# COMPANY CATERING CONTRACT QUESTIONNAIRE

## EVENT NAME

## COMPANY NAME & EVENT

COMPANY NAME: \_\_\_\_\_

TIME OF EVENT: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

DATE OF EVENT: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

MINIMUM NO. OF ATTENDEES: \_\_\_\_\_

FAX: \_\_\_\_\_

## SETUP (PLEASE CHECK ALL THE APPLY)

☐ CLASSROOM

☐ ROUND OF 8

☐ THEATRE

☐ CONFERENCE STYLE

☐ ROUND OF 10

☐ CRESCENT ROUNDS

☐ U-SHAPE

☐ RECEPTION

☐ SPECIAL SETUP (please explain)

☐ HOLLOW SQUARE

☐ LIVING ROOM

## NAME OF PERSON SIGNING CONTRACT

## ON SITE CONTACT

NAME: \_\_\_\_\_

NAME: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

EMAIL: \_\_\_\_\_

EMAIL: \_\_\_\_\_

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*North Star*  
HOHEAN CASINO RESORT