



<b>For Office Use Only</b>	
Date Received: _____	
Received By: _____	
Telephone Follow up: <b>Y</b> <b>N</b>	

# Courtyard Catering Contract

**Customer Information**

Customer/Organization Name: \_\_\_\_\_ Student Organization: **Y** **N**  
 Customer/Organization Billing Address: \_\_\_\_\_  
 Organization Telephone Number: \_\_\_\_\_ Organization Fax Number: \_\_\_\_\_

*Contact Information (Individual Placing the Order)*

Name: \_\_\_\_\_ Telephone Number: \_\_\_\_\_  
 Event Contact Name (if different): \_\_\_\_\_ Telephone Number: \_\_\_\_\_  
 Tax Exempt Number (if applicable): \_\_\_\_\_

**Event Information**

Date: \_\_\_/\_\_\_/\_\_\_ Location: \_\_\_\_\_  
 Start Time: \_\_\_\_\_AM/PM  
 End Time: \_\_\_\_\_AM/PM  
 Estimated Number of Guests: \_\_\_\_\_

*Please see the Catering Menu for our policy on estimated number of guests at catered events.*

<b>Please review the Catering Menu and select all that apply:</b>			
AM Refreshments	<input type="checkbox"/>	Full Service	<input type="checkbox"/>
Luncheon	<input type="checkbox"/>	Delivery/Clean-up	<input type="checkbox"/>
PM Refreshments	<input type="checkbox"/>	Delivery Only	<input type="checkbox"/>
Dinner	<input type="checkbox"/>	Pick-Up	<input type="checkbox"/>
Buffet	<input type="checkbox"/>	Linens	<input type="checkbox"/>
Banquet	<input type="checkbox"/>	China	<input type="checkbox"/>

<p><b>Menu selections and other important information:</b></p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>
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**Customer Signature**

Signature \_\_\_\_\_ Date \_\_\_\_\_

Please fax this completed form to **Faculty Student Association, Attn: Catering Department**, at (315) 786-2312. You may also bring the completed form to room 4-002. All questions should be directed to Deb Gaudette.

**Deb Gaudette**  
 Catering Manager  
 (315) 786-2312  
 dgaudette@sunyjefferson.edu