

Banquet Event Order Form

Event Information

- Event Name: _____
- Event Date: _____
- Event Time:
 - Start: _____
 - End: _____
- Venue Location: _____
- Expected Number of Guests: _____

Client Information

- Client's Full Name: _____
- Company/Organization (if applicable):

- Contact Number: _____
- Email Address: _____
- Billing Address: _____

Banquet Details

- Type of Event (Check one):
 - Corporate
 - Social
 - Fundraiser
 - Other: _____
- Menu Selection: _____
- Beverage Service:
 - Non-Alcoholic
 - Beer & Wine
 - Full Bar

Table Setup

Table Type	Quantity	Special Instructions	Linen Color
Round Tables			
Rectangular Tables			
High Tables			
Buffet Tables			

Additional Services

- Audio/Visual Equipment
- Dance Floor
- Stage Setup
- Decorations & Centerpieces

Payment Information

- Payment Method:
 - Credit Card
 - Bank Transfer
 - Check
- Deposit Amount Paid: _____
- Balance Due: _____

Client Signature: _____

Date: _____