Event Catering Order Form

EVENT INFORMATION

Event Name: ______
Date: ______
Time: _____
Location: ______
Number of Guests: ______

MENU SELECTION

Quantity	Dish Name	Special Instructions	Price

ADDITIONAL SERVICES

□ Buffet Setup

□ Tableware Rental

\square	Staff	for	Ser	vina
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□ Beverage Station

PAYMENT INFORMATION

Total Cost: \$_____

Deposit Amount: \$	-
Balance Due: \$	

Customer Signature:	Date:	