

Restaurant Waiting List Form

Restaurant Name: _____

Location: _____

Date: _____

CUSTOMER DETAILS

Full Name: _____

Phone Number: _____

Number of Guests: _____

PREFERRED SEATING

Indoor Outdoor Bar Booth No Preference

WAITING LIST TABLE

Name	Party Size	Phone Number	Estimated Wait Time	Table Assigned

WAITLIST POLICIES

- Reservations are held for 10 minutes after notification.
- Customers may wait inside or receive a text when the table is ready.
- Large parties may require additional wait time.

Host Signature: _____ Date: _____