



Date: _____

Name: _____

Company/Organization: _____

Address: _____

Phone (Home): _____

Phone (Office): _____

Cellular: _____

Fax: _____

Email Address: _____

Event Date: _____

Event Time: _____ **Set-Up Time:** _____

Event Type: Birthday Wedding Reception Fundraiser
 Meeting Retirement Family Reunion Other (describe)

Catering: Yes No **Caterer's Name & Phone:** _____
(Caterers must be licensed and insured)

Will alcohol be served at event? Yes No
If yes, what type of service? Open Bar Cash Bar Drink Tickets

Number of Guests: _____