

Club Event Food and Beverage Order Form

Date of Event: _____

Event Name: _____

Contact Person: _____

Phone Number: _____

Email Address: _____

Food Selection

Item	Quantity	Price per Unit	Total
Appetizers		\$ _____	\$ _____
Main Course		\$ _____	\$ _____
Desserts		\$ _____	\$ _____

Beverage Selection

Item	Quantity	Price per Unit	Total
Soft Drinks		\$ _____	\$ _____
Juices		\$ _____	\$ _____
Alcoholic Beverages		\$ _____	\$ _____

Total Cost

Total Cost of Food: \$ _____

Total Cost of Beverages: \$ _____

Grand Total: \$ _____

Special Requests

Signature: _____