

Company Party Form

Party Coordinator: _____

Company Name: _____

Address: _____

Phone Number: _____

Party Date: _____ Party Time: _____

Party Plan : \$18.50 p/p _____ \$16.50 p/p _____



Number of Guests: _____

Estimated Price: \$ _____

10% Gratuity: \$ _____

Less Deposit: \$ _____

Amount Due: \$ _____

**50% Minimum Deposit*

**All cancellations must be received 5 days prior to event or deposit will be forfeited.*

**Confirmation for number of guests must be made 3 days prior to event.*

The final price will not be based on less than number confirmed.

Signature: _____