

Premier Catering | *Catering Agreement*

Name _____

Event Date _____

Address _____

Event Location _____

Phone _____

Event Type _____

Of Guests _____

Dining Time _____

**Food will remain up for one hour*

Deposit Required _____

On-Site Cooking

Is Available

Is NOT Available

Date Paid/Check # _____

**Availability based upon location, minimum order, and scheduled date.*

Tax Exempt # _____

Menu Selections _____

Terms of Agreement

* Final order must be verified 7 days prior to event.

* Non-refundable deposit is required.

* Full payment is due on or before the date of event.

* Prices subject to 5.5% sales tax and 15% service charge.

* All events include plates, utensils, and condiments.

By my signature, I have read and agree to the terms of this agreement.

Client Signature _____

Date _____

Call: (608) 782-0886 | Fax: (608) 782-0871 | Email: info@premiercatering.org

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