 Catering Requisition Form

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| **EVENT CONTACT NAME: NAME OF DEPARTMENT / ORGANIZATION:** | |
| **EVENT DESCRIPTION:** | |
| **ADDRESS IF NOT A GSU EVENT:** | **DATE OF EVENT:** |
| **PHONE #:** | **LOCATION / ROOM NUMBER:** |
| **EMAIL:** | **EVENT TIME:** |
| **ESTIMATED NUMBER OF GUESTS:** | **TIME TO SET BY:** |
| **PICK-UP  DELIVERED** | **TIME TO PICK UP:** |
| **MEAL:  BREAKFAST  LUNCH**  **DINNER**  **SNACK/ REFRESHMENT  HORS D’OEUVRES** | **BILL EVENT TO (PLEASE PROVIDE GSU PO#/ ACCOUNT #)** |
| **TYPE OF SERVICE:  SERVED  BUFFET** | **DISPOSABLE SERVICE  CHINA SERVICE** |
| **ADDITIONAL LINEN OTHER THAN BUFFET TABLE** | **BAR SERVICE:  CASH  HOST** |

**PLEASE DOUBLE-CLICK ON CORRESPONDING BOXES TO MARK YOUR SELLECTIONS**

## Items requested (A representative from Arena Food Service is happy to assist in planning your event):

**Special Instructions:**

# A representative from Arena Food Service, Inc. will contact you to assist with planning or event or to answer any questions you may have.

# Patrons Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_

# Arena Food Service, Inc. Rep. Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_

# PRIOR TO JULY 1, 2015, PLEASE EMAIL THIS FORM TO INFO@ARENAFOODSERVICE.COM.