 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.