

Event Inquiry Form

General Information COMPANY/ORGANIZATION NAME:	
CONTACT #I FULL NAME:	
MAILING ADDRESS:	
Phone: (Day):	(CELLULAR):
EMAIL(s):	
Event Information DESIRED DATE (D/M/Y):	
ALTERNATIVE DATE (D/M/Y):	
EXPECTED NUMBER OF GUESTS:	
FOR WEDDINGS: PACKAGE OR A LA CARTE PREFERENCE:	
WEDDING COORDINATOR:(PLEASE NOTE THAT A WEDDING PLANNER OR DESIGNATED POIL	NT PERSON IS REQUIRED FOR WEDDINGS OF 30 PERSONS OR MORE)
Preferred Venue, Times, Set-Up, Vendor and	<u>F&B</u>
EVENT #I TYPE (SELECT ONE):	
MEETING BREAKFAST LUNCHEON	COCKTAIL DINNER WEDDING RECEPTION CEREMONY
TIME:	
Venue:	-
SET UP (SELECT ONE):	
CONFERENCE CLASSROOM THEATRE BANQUET ROUND BANQUET LONG	
U-SHAPE HOLLOW SQUARE COCKTA	AIL CRESCENT
SEATING CONFIGURATION (IF APPLICABLE):(I.E. I HEAD TABLE, 5 TABLES OF 10, 3 TABLES OF 8, ETC.)	· · · · · · · · · · · · · · · · · · ·
A/V:	
FLORAL:	
MUSIC/ENTERTAINMENT:	
DECOR:	
PHOTOGRAPHER/VIDEOGRAPHER:	
OTHER:	
EVENT #I FOOD & BEVERAGE:	
HAND PASSED CANAPÉS:	
MENU PREFERENCE:	
SPECIALTY CAKE:	
Bar (Open, Cash or Consumption?):	

EVENT #2 TYPE (SELECT ONE):
MEETING BREAKFAST LUNCHEON COCKTAIL DINNER WEDDING RECEPTION CEREMONY
TIME:
Venue:
SET UP (SELECT ONE):
CONFERENCE CLASSROOM THEATRE BANQUET ROUND BANQUET LONG
U-SHAPE HOLLOW SQUARE COCKTAIL CRESCENT
SEATING CONFIGURATION (IF APPLICABLE):
A/V:
FLORAL:
MUSIC/ENTERTAINMENT:
DECOR:
PHOTOGRAPHER/VIDEOGRAPHER:
OTHER:
EVENT #2 FOOD & BEVERAGE:
HAND PASSED CANAPÉS:
MENU PREFERENCE:
SPECIALTY CAKE:
BAR (OPEN, CASH OR CONSUMPTION?):
EVENT #3 TYPE (SELECT ONE): MEETING BREAKFAST LUNCHEON COCKTAIL DINNER WEDDING RECEPTION CEREMONY
TIME:
Venue:
SET UP (select one):
CONFERENCE CLASSROOM BANQUET ROUND BANQUET LONG
U-SHAPE HOLLOW SQUARE COCKTAIL CRESCENT
SEATING CONFIGURATION (IF APPLICABLE):
A/V:
FLORAL:
MUSIC/ENTERTAINMENT:
DECOR:
PHOTOGRAPHER/VIDEOGRAPHER:
OTHER:
EVENT #3 FOOD & BEVERAGE:
EVENT #3 FOOD & BEVERAGE: HAND PASSED CANAPÉS:
HAND PASSED CANAPÉS: