Café La Kiss

Catering Request Form

Berwick ☐ **Churchill** ☐

Function: _____ **Date:** _____

Room : _____ **No. Guests:** _____

Time	Serves	Menu Item	Cost ($)	Total ($)
-				$ 0.00
-				$ 0.00
-				$ 0.00
-				$ 0.00
-				$ 0.00
-				$ 0.00
-				$ 0.00
-				$ 0.00
-				$ 0.00
-				$ 0.00
-				$ 0.00
-				$ 0.00
-				$ 0.00
-				$ 0.00
-				$ 0.00
-				$ 0.00
-				$ 0.00
-				$ 0.00
			Total:	$ 0.00

NOTES/DIETARY REQUIREMENTS:

TERMS AND CONDITIONS:

* Final numbers for catering should be confirmed by Midday on wednesday of the week preceding your booking. Changes to the Final numbers maybe be accepted with less than a weeks notice at the discretion of the catering manager.
* Where more than 48hrs notice of a cancellation is not provided , the catering costs will be automatically charged , with respect to rosters and food preparation already undertaken by the caterers.

Req By: _____ **Authorised By:** _____

Ph: _____ **Date:** _____

Account Code (if applicable):

Campus Life | Federation UNIVERSITY • AUSTRALIA