

External Catering Request

Contact Details

Company / Club / Organisation Name _____

Name _____

Address _____

Phone _____ Mobile _____

Email _____ Please note confirmations and invoice will be sent to this email address

Catering Details

Function Name _____

Date _____ / _____ / _____ Number of attendees _____

Function Start Time _____ AM / PM Estimated Finish Time _____ AM / PM

Venue _____

Campus
Building
Room

Food/Beverages Required - Please refer to menu

Menu Item Number	Menu Item Selection	Number of serves	Serving Time	Clearing Time
1019	Selection of 5 hot finger food – 1021, 1027, 1039, 1024, 1032 (Example Only)	25	12pm	3pm

Comments and other information (dietary requirements etc)

Contact us to discuss your requirements;

Hospitality and Conferencing, Campus Life, Federation University
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 Telephone | (03) 5327 9480
 Email | hospitalityandevents@federation.edu.au
 Web | federation.edu.au/conferences