

ORDER #		DATE OF REQUEST	
<b>CLIENT INFORMATION</b>			
NAME			
PHONE		EMAIL	
ORGANIZER			
BILLING ADDRESS			
<b>EVENT DETAILS</b>			
EVENT NAME			
EVENT DATE		SETUP TIME	<input type="checkbox"/> AM <input type="checkbox"/> PM
		EVENT START/END	<input type="checkbox"/> AM <input type="checkbox"/> PM
EVENT LOCATION	<input type="checkbox"/> <input type="checkbox"/>	CLEANUP END	<input type="checkbox"/> AM <input type="checkbox"/> PM
EVENT ADDRESS			
EVENT TYPE	<input type="checkbox"/> MEETING <input type="checkbox"/> CONFERENCE <input type="checkbox"/> RECEPTION <input type="checkbox"/> LUNCHEON <input type="checkbox"/> DINNER <input type="checkbox"/> WEDDING <input type="checkbox"/> BIRTHDAY <input type="checkbox"/> HOLIDAY <input type="checkbox"/> OTHER:		
# OF GUESTS	ADULTS:	CHILDREN:	TOTAL:
<b>SERVICE DETAILS</b>			
SERVICE STYLE	<input type="checkbox"/> BUFFET <input type="checkbox"/> PLATED <input type="checkbox"/> FAMILY STYLE <input type="checkbox"/> PASSED HORS D'OEUVRES <input type="checkbox"/> PICK-UP <input type="checkbox"/> DELIVERY <input type="checkbox"/> FULL SERVICE <input type="checkbox"/> DROP-OFF		
EQUIPMENT NEEDED	<input type="checkbox"/> TABLES (# _____ ) <input type="checkbox"/> CHAIRS (# _____ ) <input type="checkbox"/> LINENS (# _____ ) <input type="checkbox"/> CHINA <input type="checkbox"/> SILVERWARE <input type="checkbox"/> GLASSWARE <input type="checkbox"/> DISPOSABLES <input type="checkbox"/> CHAFING DISHES <input type="checkbox"/> SERVING UTENSILS <input type="checkbox"/> OTHER:		
BEVERAGE SERVICE	<input type="checkbox"/> WATER <input type="checkbox"/> COFFEE <input type="checkbox"/> TEA <input type="checkbox"/> SOFT DRINKS <input type="checkbox"/> PUNCH <input type="checkbox"/> JUICE <input type="checkbox"/> BEER <input type="checkbox"/> WINE <input type="checkbox"/> FULL BAR <input type="checkbox"/> OTHER:		
<b>MENU SELECTION &amp; QUANTITIES</b>			
<input type="checkbox"/> BREAKFAST <input type="checkbox"/> BRUNCH <input type="checkbox"/> LUNCH <input type="checkbox"/> DINNER <input type="checkbox"/> DESSERT <input type="checkbox"/> HORS D'OEUVRES			
APPETIZERS			
MAIN COURSE			
SIDE DISHES			
DESSERTS BEVERAGES			
SPECIAL INSTRUCTIONS			