

# Banquet Catering Order Form

## Event Details

Event Name

Date

Time

Number of Guests

Event Location

Event Planner Name

Contact Number

Email

## Menu Selection

Menu Item	Quantity	Dietary Notes
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

Dietary Restrictions & Allergies 

Describe any dietary needs or allergies

## Setup & Service

Setup Time

Service Style 

Select

Special Equipment Needs 

E.g. chafing dishes, AV, etc

## Additional Notes

Other instructions, timeline, etc