

## CATERING SALES EVENT PLANNING WORKSHEET

Date: \_\_\_\_\_ Order #: \_\_\_\_\_

### Contact Information:

Contact Name: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ Fax Number: (if off campus) \_\_\_\_\_  
Department: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Email: \_\_\_\_\_

Who is the client contact preparing the event for and what are their party preferences:  
(i.e. snack, buffet, served, etc.) \_\_\_\_\_

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### Event Information:

Date of Event: \_\_\_\_\_ Number of Guests: \_\_\_\_\_  
Event Begins: \_\_\_\_\_ Set-Up Time: \_\_\_\_\_  
Event Ends: \_\_\_\_\_ Break Down Time: \_\_\_\_\_  
Location of Event: \_\_\_\_\_  
Is the location locked? \_\_\_\_\_ If so, how can we gain access? \_\_\_\_\_  
What is the earliest time that we can arrive? \_\_\_\_\_  
Have they contacted Campus Support to Reserve Room & request Set Up \_\_\_\_\_  
Have they contacted I.T. for any audio visual needs \_\_\_\_\_  
If there is another event immediately after the event, where will our non-disposable equipment  
be located so that it will not get lost? \_\_\_\_\_  
Purpose of Event: \_\_\_\_\_  
Type of Event (B, L, D or Reception): \_\_\_\_\_  
Paper or China: \_\_\_\_\_  
Linen Requested:  Y  N \_\_\_\_\_  
Flowers or other Center Piece Requested: \_\_\_\_\_  
Menu Preferences: \_\_\_\_\_

Do they prefer Bottled or Bulk beverage Service: \_\_\_\_\_

### Billing Information:

Method of Payment: \_\_\_\_\_ Requisition \_\_\_\_\_ Check \_\_\_\_\_ Credit Card \_\_\_\_\_  
Account Number: \_\_\_\_\_  
Requisition Number: \_\_\_\_\_