



Banquet Room Booking Contract

Reservation Name: _____

Booking Contact Name: _____

Type of Event: _____

Company Name (if applicable): _____

Phone:: _____ Email:: _____

Date of Event: _____ Set Up Time: _____

Start Time: _____ End Time: _____ 2 hours

Final Headcount Required by: _____ (2 weeks prior)

If different from contact name above

Contact Info of Person(s) Responsible for final Payment:

_____ (name) _____ (phone)

Final Payment Required to Be On One Check for parties over 25 guests \ Exceptions made for some events if payment is needed on day of event.. Must be approved by Manager.

Minimum Room Requirement:

\$12/empty seat less than _____ dining adults (dependent on room)

2 children entrées account for 1 dining adult

Entrée Selection & Side Options:

Non-Alcoholic Beverages Offered:

Bar Selection Option:

Check if you will need a cake table with service: _____

Would you like to add table linens and napkins? _____

Deposit Requirement & Payment: \$ _____

Deposits are not refunded for cancellations with less than 3 month notice. Will be applied to final bill as payment. Deposits required to book space.

I have read over the Private Room Booking terms provided on www.hilltopfishfare.com and understand the policies for booking the space.

Customer: _____ (print & date)

_____ (signature & date)

Booking Manager: _____ (signature & date)