

Valley Brewing Company

Banquet Event Order Form

Day/Date _____ Time : Guests arrive _____ Meals served _____

Name of Group: _____ Party Theme: _____

Address: _____ City: _____ Zip: _____

Contact

Person: _____ PHONE: Home _____ Work _____

Fax: _____ e-mail _____

Initial Arrangements

Approximate count: _____ Sit down Appetizer Party

Day or Evening Event o/s cake fee \$25. Hosted Bar / No Host

MENU CONFIRMATION

Final Count: _____

Time _____ Appetizers :

Chips/Salsa	Vegetable	Mushrooms	CheeseQues.	CknQues.	Meat/Cheese
CknStrips	CknWings	Fruit	TacoDip/Chips	Shrimp	Balls

Time: _____ Lunch/Dinner:

Black Cat Menu Tavern Menu Gold Menu Brewers Menu Spaghetti Ribs/Chicken

Dessert: Dessert Tray-Variety Individual Desserts Chocolate Mousse (O/S Cake Fee)

Deposit Amount\$ _____ Cash Check _____ date received _____

Customer Signature _____ date: _____ MGR _____

