

Function Information

Name _____ Date _____

Address _____

Phone _____ Fax _____

Email _____

Sponsor Name _____ Member Number _____

Sponsor Phone _____ Fax _____

Type of Function _____ Room _____

Arrival Time _____ Serving Time _____

Number of Guests Expected _____

Room Set Up

Head Table _____

Number of Guest Tables _____

Sign In Table _____

Gift Table _____

Cake Table(s) and Location _____

Registration Table _____

Reserved Tables _____

Dance Floor (Open/Covered) _____

DJ/Band _____

Overhead Projector _____

LCD Projector _____

Slide Projector _____

Screen _____ Podium _____

Big Screen TV/DVD/VCR _____

Dry Erase Board w/ Markers _____

Power Cords _____

Microphone _____ Flip Chart _____
Wireless Internet Access _____
Dance Floor (Compass Room Only) _____
Lakeside _____
Outside _____
Tablecloths (Color) _____
Napkins (Color) _____
Sashes (Color) _____
Flowers From _____
Cake From _____
Music By _____

Services

Dedicated Bartender _____
Type of Bar _____
Cake Service _____
Wedding Party Service _____
Security _____

Miscellaneous

Please return to the Catering Office
Monday-Friday 9:00 AM to 5:00 PM
Or
Fax (505)327-4455