

CATERING



CATERERS:

CATERERS
ADDRESS:

CONTACT DETAILS

NAME

PHONE

EMAIL

DIRECTOR:

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| | | |
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ASSISTANT:

| | | |
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CHEF:

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CATERERS INFORMATION

Guest Capacity:

DAY

EVE

Minimum Courses
required:

Minimum Guest
Numbers required:

Menu Samples Received:

Y

N

Menu Style:

Sit Down Meal

Family Style

Buffet

None

OFFICIAL MENU

CANAPÉS

Number of items:

Options chosen:

- 1
- 2
- 3
- 4
- 5
- 6

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STARTER



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| | |

MAIN COURSE



| | |
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| | |
| | |

DESSERT









EVENING FOOD









OR FOR AN EVENING BUFFET

Options chosen:

1

2

3

4

5

6

7

8

DRINKS

SUPPLIED BY:

YOU

VENUE

EXTERNAL
BEVERAGE COMPANY

If external beverage company:

BEVERAGE COMPANY:

CONTACT DETAILS:

DELIVERY DAY & TIME:

ARE YOU SUPPLYING WINE ON THE TABLE?

YES

NO

If YES, how many bottles?

How many glasses per person?

*A bottle usually holds 5 glasses, a
sparkling bottle holds around 6!*

Drinks options and/or bottle names:

ALCOHOLIC

NON-ALCOHOLIC

COCKTAIL HOUR:

| | |
|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> |
|----------------------|----------------------|

TABLE WINE - RED

| | |
|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> |
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TABLE WINE - WHITE

| | |
|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> |
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TABLE WINE - ROSÉ

| | |
|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> |
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TOASTING DRINK

| | |
|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> |
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COFFEE/TEA

| | |
|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> |
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Comments:

FEES

COST

DEPOSIT PAID ON

FINAL BALANCE

BALANCE DUE

PRICE PER HEAD
INCL. VAT:

| | | | |
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| | | | |
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OR

COST PER HEAD

GUEST #'S

TOTAL COST

DUE ON

CANAPÉS:

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STARTER:

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MAIN COURSE:

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DESSERT:

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DRINKS:

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COFFEE/TEA:

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EVENING FOOD:

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SUPPLIER MEALS:

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GLASS HIRE:

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TABLE LINEN:

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NAPKINS:

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Keep your eyes open for unforeseen pre & post-wedding costs, ie. glass breakages/ extra food needed especially in the evening, menu tasting fees, cake cutting fees, equipment hire charges, cutlery and crockery fees. Ask your caterers about these and make a few notes below:

GUEST REQUIREMENTS

ANY ALLERGIES:

ANY DIETARY
REQUIREMENTS:

APPROXIMATELY, how many weeks before the big day do you need to confirm your guest numbers with the Caterers?

WEEKS before

When will your **FINAL** guest numbers need to be confirmed with the Caterers?

DAYS before

POLICIES

Caterers **Cancellation** Policy:

Caterers **Postponement** Policy:

Caterers **Refund** Policy:

Additional Extra's/ Notes:

TO PRINT AND INCLUDE INTO YOUR FILE:



All **PAYMENT RECEIPTS & INVOICES**



All **POLICIES**, Cancellation/ Refunds etc. *Please read these through carefully yourself*



Any **PAPER TRAILS/ CONTRACTS** for negotiations agreed upon



Any **MENU SAMPLES** sent to you