

R. B. RUSSELL VOCATIONAL HIGH SCHOOL
CULINARY ARTS PROGRAM

FUNCTION REQUEST FORM 2017-18

Contact Name or Company: _____

Phone # _____ Date order was placed: _____

Method of Payment (Cheque, cash, or billing): _____

Billing Address: _____

Date of Function: _____ **Pick-up Time:** _____

Number of Persons (**final # required 5 days prior of event**): _____

Food & Beverage:

Instructions: _____

Total Price: _____

Approved By (**Chef Mike or Chef Rebecca**): _____

If charged to Principal's Account: _____ Approved by: _____

J. Connell / B. Davidson

PLEASE NOTE:

Catering services are available from October 1st to June 1st

A minimum of 5 business days' notice is required for all out of school functions, 3 for in school functions.

We require 5 business days for any cancellations or a charge will be applied at our discretion.

Orders will not be accepted 1 week prior to holiday closures or 1 week following holiday closures.

50% deposit is required for all orders over \$100

Pick-up only