



## Baldwin-Whitehall School District

### Food Service Department Catering Request Form

Name of Requester \_\_\_\_\_ Date of Request \_\_\_\_\_  
 Building \_\_\_\_\_ Room Location \_\_\_\_\_  
 Date of Activity/Event \_\_\_\_\_ Time of Activity/Event \_\_\_\_\_  
 Number of Persons in Attendance \_\_\_\_\_ Estimated cost of Request \$ \_\_\_\_\_

<b>Food Service Request</b> <i>(check all that apply)</i>			
<b>Beverages</b>	<b>Snacks</b>	<b>Meal Service</b>	<b>Reception</b>
<input type="checkbox"/> Coffee <input type="checkbox"/> Hot Tea <input type="checkbox"/> Cold Tea <input type="checkbox"/> Soft Drinks <input type="checkbox"/> Water <input type="checkbox"/> Other • • •	<input type="checkbox"/> Bagels <input type="checkbox"/> Breakfast Rolls <input type="checkbox"/> Fruit Tray <input type="checkbox"/> Muffins <input type="checkbox"/> Cheese & Crackers <input type="checkbox"/> Cookies <input type="checkbox"/> Salads <input type="checkbox"/> Vegetable Tray <input type="checkbox"/> Other • •	<input type="checkbox"/> Breakfast <input type="checkbox"/> Lunch <input type="checkbox"/> Dinner  <input type="checkbox"/> Menu Items • • • • •	<input type="checkbox"/> Hors d'oeuvres <input type="checkbox"/> Pastries <input type="checkbox"/> Desserts <input type="checkbox"/> Punch <input type="checkbox"/> Other • • • • • • • • • <input type="checkbox"/> Menu Items • • • •
<b>Billing Contact Information:</b> <i>Name &amp; Address</i>     		<p><b><u>Note:</u></b>  <i>The Food Service Director will contact Requester to identify menu items for meal service.</i></p>	<p><b><u>Note:</u></b>  <i>The Food Service Director will contact Requester to identify menu items for reception.</i></p>

#### Approvals

Principal/Administrator \_\_\_\_\_ Date \_\_\_\_\_  
 Director of Admin. Services \_\_\_\_\_ Date \_\_\_\_\_  
 Food Service Director \_\_\_\_\_ Date \_\_\_\_\_  
**Budget Account** \_\_\_\_\_

#### *Office Use Only*

Charge Cost to:  Organization - \_\_\_\_\_