

BANQUET AGREEMENT

GENERAL INFORMATION

Today's Date:	Day and Date of Banquet:
Name of Group:	Total Number Attending the Event:
Organizer/Contact Name:	
Type of Event:	How did you hear about OSF?
Phone:	
Fax:	
Email:	Manager Booking this Event:
Address:	Person in Charge Day of Event:

SERVICE TYPE

(Check One)

Table Service	Buffet Service
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MENU

Our Complete Meal includes your entrée, salad, bread, and ice cream (beverage extra)

App. 1:	Qty.		\$	Entrée 1:	Qty.		\$		
App 2:	Qty.		\$	Entrée 2:	Qty.		\$		
Salad Dressing:	Qty.		\$	Entrée 3:	Qty.		\$		
Additional:	Qty.		\$	Dessert:	Qty.		\$		
Total:				\$	Total:				\$

***If additional food items are needed during a buffet service event, they will be charged accordingly.**

BEVERAGE

Will the group order soft drinks priced at \$1.99?	Yes	No
Paid by Host		Paid for by Guest
Will the group order coffee, tea or milk priced at \$2.25?	Yes	No
Paid by Host		Paid for by Guest
Will the group order liquor, beer or wine?	Yes	No
Paid by Host		Paid for by Guest

TIME LINE

Guests Arrive:		Cocktails Begin:	
Meal Service Begins:		Guests Expect to Leave Room:	

ROOM SET-UP

OSF has guaranteed a private room	Yes	No
Room may be shared with other patrons	Yes	No

Additional Details:	
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PAYMENT/DEPOSIT

- ✓ **Prices are subject to change** if this event is booked more than 30 days in advance
- ✓ Patrons customarily **tip** servers in the neighborhood of 18%. **The manager can add an amount to the check if instructed.**
- ✓ If tax exempt, organizer must provide **tax exempt form** that validates this organization is exempt from tax on food and beverages. Is this group tax exempt? Yes No
- ✓ Name of **person** at the event that is **responsible for making payment:**
- ✓ **Payment is expected at the conclusion of the event**
- ✓ **Expected form of payment:** (We accept cash and credit cards)
- ✓ **One check will be presented, unless otherwise noted:**

GUEST RESPONSIBILITIES

- ✓ **Return this document by e-mail. This will serve as your approval of the contract and your space will be reserved.** Any changes must be authorized by management and should be communicated by e-mail or telephone.
Return to the following e-mail address: **southcenter_sales@osf.com**
- ✓ **Present the tax exempt form** (if any) to a manager the day of the event.
- ✓ **Call 206/664-6800** or e-mail to give final count **three days before the event.** Any Manager can take the final count.
- ✓ At the Manager's discretion, guest agrees to pay \$50 per hour or a fraction of that if the event **exceeds end time** as detailed in this contract.
- ✓ Agree to pay for a **minimum of 90% of the final count** as called in three (3) days prior to the banquet.

Thank you for choosing us to host your event. This is your Banquet Contract. Please take a moment to review the details.

Returning this by e-mail will confirm your space and hold your reservation.

Please note this is a read-only file. Although your changes may appear on your screen, you will be unable to save and send the modifications.

If you wish to make changes please mention these on your return e-mail or simply give us a call.

Covid-19

We have every intention and will do all that we can to honor your banquet. Your business, especially now, is very much appreciated! Like other restaurants, our government may impose regulations that could cause additional challenges. For example, we may face limits on the number of guests permitted in the restaurant or on the maximum size of a group. If these issues come up, we will be sure to contact you and do the best we can to accommodate your group!

OSF USE ONLY	
Contract returned to OSF:	
Banquet Confirmed:	
Final Count (3-days prior)	Adults: Children: