



Please Return form to:

email: lccatering@perkinsusa.com

Phone: 704-216-6018

Event Date (Day, Month, Date, Year)	Event Name	Location of Event	Event Set Up Time	No. Of Guests
Meal Time (If Different from Set Up Time)		End Time	Contact Person	Campus/Outside Group
Contact Person Phone	Email	Fax	☐ Campus ☐ Outside Group	Department
Address (Street)		City	State	Payment Method
Zip Code	Zip Code		☐ PO # ☐ Cash ☐ Credit Card ☐ Check	
Type of Service: ☐ BREAK ☐ Buffet Service ☐ Served Meal ☐ Reception				
Menu:		Desserts:		
		Beverages:		
Set-up Instructions:				
Special Linen, Centerpieces, China Request:				
Linens: Color: no preference Size: 85(covers table top) 90(Covers Half to Floor) 120(To the Floor)	Yes No Yes No Yes No			
Linen Napkins Color: Yes No				
China Service: Yes No				
Plastic Service Yes No				
Paper Napkins: yes Color: no preference				
****PLEASE BE AS DETAILED AS POSSIBLE****				
CANCELLATION POLICY & FINAL GURANTEE IS DUE 72 HOURS PRIOR TO THE EVENT				