

Dixie Elks Lodge #1743

Special Event Contract

Event Date:_____ Date Booked:_____

PLACE COMPLETED FORM IN THE EVENT COORINDATOR'S BOX

ACTIVITY INFORMATION NEEDED

Name of Activity:						
Responsible Party:	Member #:					
Room Request: (Circle one)	Lodge	19 th Hole	Front Dining	Back Dining	Pavilion	
Phone Number:						
Expected Number to Attend:			Time	Period:	to	
	Color requested:					
		SET	UP REQUIREMENT	ī		
Special instructions	or request for t	his event: (Roo	m set-up, what table	e size, how many, e	tc)	
Service Requested:						
Cocktails:	Yes	No	Hours of service:	t	o	A.M./P.M.
Food:	Yes	No	Hours of service:	t	0	A.M./P.M.
Entertainment Requ	ested: Yes	No	Туре:	Band:		
Event menu request	ed:					
For Lodge	e events only, th	ne event chairm	an is responsible	for getting crews f	or the followi	ng:
Set-Up Crew:						
Kitchen Crew:						
Clean-up Crew:						
<u>* For all food, 50%</u>	of cost predict	on is due wher	n contract is accep	ted. Balance is du		
<u>** Non-r</u>	efundable clear	n up fees are du	e when contract is	s submitted to eve	nt coordinato	<u>r.</u>
			E AUTHORIZATION			
Trustee Chairman				Date:		
Event Coordinator				Date:		
House Committee Guarantor:	•			Date: Date:		