



Cafe Events & Functions Form

Contact Name: _____ Phone number: _____

Event Date: _____ Event Time: _____

Event Type: _____

Dietary requirements: _____

Please inform us of any known dietary requirements

\$ Total

☐ **Option 1 - Sweets**

\$23/person • Minimum of 10 people

No. of people

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Includes

- Assorted Slices
- Mini Muffins
- Mini Pancakes with Fresh Cream & Jam
- Banana Bread with Cinnamon Butter
- One small barista coffee or tea per person

Available at additional cost

- | | | |
|---|------|-------|
| <input type="checkbox"/> Sandwich Platter | \$79 | |
| <input type="checkbox"/> Mini Quiches Platter | \$90 | |
| <input type="checkbox"/> Corn Fritter Bites Platter | \$75 | |

☐ **Option 2 - Light Refreshments**

\$29/person • Minimum of 10 people

No. of people

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Includes

- Spring Rolls
- Sandwiches
- Mini Quiches
- Corn Fritter Bites
- Assorted Slices
- Mini Muffins
- One small barista coffee or tea per person

☐ **Option 3 - Lunch****\$34/person • Minimum of 10 people**

No. of people

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Includes

- Spring Rolls
- Sandwiches
- Mini Quiches
- Corn Fritter Bites
- Arancini Balls
- Assorted Slices
- Mini Muffins
- One small barista coffee or tea per person

☐ **Bar Tab**

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We are Fully Licensed. Please see separate cafe Wine and Beer Menu.**Grand Total \$.....****50% DEPOSIT REQUIRED WITH ORDER.** *Select payment type below:*☐ Cash at Cafe☐ Credit Card at Cafe☐ Credit Card by phone 02 4309 3301☐ Direct Deposit to: Living Gourmet Cafe BSB: 082 356 Acc No: 77 132 6631

Amount paid Date paid

Notes:

Staff Only. Staff Name:

Date order received:

Date Payment Received:

Amount received: