

# TRATTORIA GRAPPOLO

## ☒ Catering Contract ☒

Please complete, sign then FAX to (805) 693-1634 or you may scan the signed form and email to:

**info@trattoriagrappolo.com**

Number in Attendance: \_\_\_\_\_

Location of Proposed Event: \_\_\_\_\_

Time and Day/Date of Event: \_\_\_\_\_

Tray Passed Hors d'Oeuvres (\$8/person) - Please circle answer:                      YES                      NO

Name of Event Contact: \_\_\_\_\_

Company Name, if Corporate Event: \_\_\_\_\_

Address: \_\_\_\_\_

Contact Phone Number(s): \_\_\_\_\_

Mobile Number of at Least 1 Attendee: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

FAX Number: \_\_\_\_\_

Additional Requests / Notes: \_\_\_\_\_

### Trattoria Grappolo Catering Policy:

☒ In order to accommodate you with our best service, the number of guaranteed attendees to your event is required no later than 1 week before your event date.

☒ A deposit of one-half of the total invoice price is required to book your reservation. The remaining balance is due in-full one week (**7 days**) before event date. Cancellations made within 30 days of scheduled event will be subject to forfeiture of said deposit.

☒ We are happy to accommodate requests for all vegetarian meals (and any other dietary needs).

### Credit Card Information (required to reserve event):

Please circle card type:              Visa                                      MasterCard                                      American Express

Credit Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Deposit Amount: **(Half of total invoice price)**

Authorized Signature: \_\_\_\_\_ Date: \_\_\_\_\_

I (Printed Name) \_\_\_\_\_ herein authorize TRATTORIA GRAPPOLO to charge my credit card a reservation deposit of \_\_\_\_\_ U.S. Dollars and I agree in full to the terms of indicated in this event contract.

**OWNER: DANIELE SERRA**  
P.O. BOX 308, SANTA YNEZ, CA 93460

☒ **EVENT MANAGER: ELISA ARRIAGA**  
☒ (805) 688-6899 ☒ [WWW.TRATTORIAGRAPPOLO.COM](http://WWW.TRATTORIAGRAPPOLO.COM)