



# GRAZING TABLE CONTRACT

CLIENT: \_\_\_\_\_

TYPE OF EVENT: \_\_\_\_\_

LOCATION OF EVENT: \_\_\_\_\_

EVENT DATE: \_\_\_\_\_

TIME OF EVENT: \_\_\_\_\_

NUMBER OF GUESTS (50 GUEST MINIMUM): \_\_\_\_\_

LIST ANY ALLERGIES OR DIETARY RESTRICTIONS:  
\_\_\_\_\_

**ADD ONS:**

GREENERY       BREAD       DIMENSION

**DEPOSIT:**

\$13/ PERSON       \$12/ PERSON       \$11/ PERSON





**SIGNATURES**

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**CLIENT'S NAME (PLEASE PRINT)**

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**CLIENT'S SIGNATURE**

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**DATE:**

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**BOARD & YOU**

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**DATE:**

**BOARD**  
*& You*