Culinary Art's Catering Contract

Culinary Arts Mission: ** Desire ** ** Dedication ** ** Discipline **

Long Beach Community College
4901 E. Carson Street, Long Beach, CA 90808
(562) 938-4502 Fax (562) 938-4334

Contract Date: _____

Requestor Name _____ Phone No. _____

Name of Organization _____ Cell # _____

Billing Name _____ LBCC Ext. _____

Billing Address _____

Estimated Number of Guests _____ ** Final Guarantee of Guests _____

Event Date _____ Event Day _____ Serving Time _____

Event Location _____

Event will be Breakfast ☐ Lunch ☐ Reception ☐ Dinner ☐

Menu

	Requestor Will Provide	Culinary Arts Will Provide
Tables		
Chairs		
Tablecloths		
Color:		
Linen:		
Napkins		
Color:		
Linen:		
Centerpiece	Yes	No
Head Table		
No. of persons:		
Table		
Line		
Buffet		
Paper Mats	Yes	No
Paper Napkins	Yes	No
Transportation		

Price $ _____

Authorization Signature _____

Deposit $ _____

Culinary Arts Signature _____

Paid In Full ☐ Date _____ **Pick-Up** ☐ **Delivery** ☐ Time _____

Please make checks or purchase orders payable to LBCC Culinary Arts - ASB Bank, Account #307192. Full payment due the day of the event unless other arrangements are approved in advance. Late payment past due five working days will be charged and additional 5% late fee.

**Final guarantee: The Culinary Arts Department must be notified of your final guarantee 48 hours (excluding weekend) prior to the event. If notified by this date, the preliminary estimate will be used as the final guarantee.