

Bandera ISD Food Services Catering Request

Please fill out this form and submit to Nita Pillet @ npillet@banderaisd.net
at least one week before the event

Group or Name _____ Event: _____

Date of event: _____ Time of Event: _____

Contact Person: _____ Phone number: _____

Location: _____ # People _____

Time event should be set up: _____

Time the event will be finished: _____.

Service needed or self serve? Service _____ Self Serve: _____

Requested Menu or Food Items

Additional Items Needed:

Plates _____ Napkins _____ Flatware _____ Cups _____

Decorations Desired: Yes _____ No _____ Describe desired decorations (if applicable)

Special Instructions:

If there are adjustments needed, please let us know so we can make the necessary changes. If there are no changes that need to be made please sign and return to Nita Pillet.

Signature

Date