



CATERING REQUEST FORM

PALOMAR COLLEGE FOOD SERVICES

PLEASE COMPLETE THE FOLLOWING INFORMATION AND SEND THE SIGNED FORM VIA E-MAIL TO:
Catering@palomar.edu

Today's Date: _____

GENERAL INFORMATION			
Person Requesting:		E-Mail:	
Department/Division:		Phone:	
Department to Invoice:		Purchase Order #:	

EVENT INFORMATION			
Event Date:		Event Location:	
Delivery Time:		Number of Guests*:	
Event Start Time:		Event End Time:	

**Final guest count must be provided to Food Services three (3) days prior to the event.*

SERVICE INFORMATION			
Type of Service:	Buffet	Preset	Reception
Tableware:	Disposable tableware	China	
Additional Services Requested:			
Linen* (indicate # needed):	Round Table	Rectangle Table	Napkins
<i>*additional charge</i>	Linen Color: _____		

MENU SELECTIONS	
Price per plate (minimum/maximum):	
Type of food requested:	
Additional comments:	

 Requester Signature:

 Dean/Director or VP Signature:

 Date

 Date