



Function at another venue/building

CLIENT / DEPARTMENT INFO			
Name of Client/Department:			
Contact Person:			
Contact Number(s):			
Email:			
Entity:		Account:	
Date of Function:			
Event/Name of Function:			
Number of Guests:			
Guests Arrival Time:			
Serving Time(s):			
Venue: (Physical Address)			Campus
			Building
			Room
Quotation Needed:	YES		NO

PLEASE TICK YOUR FOOD AND DRINK OPTIONS AND INDICATE THE SERVING TIMES:						
1. MORNING OPTIONS	✓	TIME	5. DRINKS	✓	AMOUNT	TIMES
• Sandwiches			Mineral Water			
• Muffins with Jam & Cheese			Tisers 275 ml			
• Scones with Toppings			Tea/Coffee			
• Croissant with Fillings			Liquifruit 330 ml			
• Light Snacks (4 x Savoury/Meaty, 2 x Sweet)			Soft Drinks 340 ml			
2. MIDDAY / LUNCH OPTIONS	✓	TIME				
• Sandwiches						
• Snacks (8 x Savoury/Meaty, 2 x Sweet)						
• Light Lunch (1 Meat, 1 Starch, Vegetable, Salad and Bread)			6. OTHER REQUIREMENTS			
• Buffet (ONLY 20 OR MORE) (2 Meat, 1 Starch, 2 Vegetables, Salad and Bread)			Flowers			
			Crockery			
			Serviettes			
3. CONFERENCE/MEETINGS OPTIONS						
• Early morning Coffee, Tea and Rusks						
• Mid-morning Coffee, Tea and 1 x Morning Option						
• Lunch: Snacks/Light Lunch/Buffer						
• Afternoon Coffee, Tea and Sweet Snack						



DIETARY REQUIREMENTS	NUMBER OF GUESTS	DETAILS
Allergies		
Halaal		
Vegetarian (Eats Eggs and Cheese)		
Vegan (No Animal Products)		
Diabetic		

Logistical requirements to be booked with Logistics.
(Tables, Chairs, White Screen, Data Projector, Laptop, Flip Chart etc.)

PROGRAMME TO BE FOLLOWED	YES		NO	
If programme is available, please attach to email				

EXTRA REQUIREMENTS

Thank You