

Triton College Catering Request Form

Facility and Calendar Clearance Form must be approved before food can be ordered.

Committee/Departmen	t Name:			
Ordered By:			Date of Event:	
Phone/Ext #: Email:			Guest Count: Time of Event:	
Meal:	Breakfast	Lunch	Dinner	Meeting
Event Type:	Formal	Semi-Formal	Casual	
Flatware:	Disposables	China	N/A	
Table Clothes:	Disposables	Linen	N/A	
Server Required:	Yes	No		
Recurring Event:	Yes	No		
Special Requests:				
				es and conditions of TriCafe and of th
agreement, implied or wr	itten. The patron also	agrees to pay and sat	isty the total amo	unt due on the function date.
Patron's Signature				Date
C.C. Rep's Signature				Date