

57 North Colony ST Wallingford, CT 06492

Name: _____

Date of Event:_____

Time:_____AM/PM **HOT or COLD**

Number of Guests: _____

Contact Phone: _____

Delivery: YES / NO

If yes, continue on back after taken order

All Catering is A La Carte per item.

QYT / SIZE

ITEM

This image shows a blank sheet of white paper with horizontal ruling lines. The page is divided into two equal-width columns by a vertical center fold. Each column contains ten evenly spaced horizontal lines, providing a template for writing or drawing. There are no margins, text, or other markings on the page.

Delivery Address:_____

Office / House / Complex / Apartment / Warehouse

Elevator Access if more than one floor: YES / NO

We do not deliver catering to multiple floor addresses with out elevator access.

Additional Information:_____

Tableware: YES / NO _____

Service Rentals: YES / NO _____

Delivery Option: Drop-Off only / Set-Up / Return

Special Notes/Instructions:_____

Sub Total: \$_____

Delivery: \$_____

Gratuity: \$_____

Rentals: \$_____

Tableware: \$_____

CT Tax 7.35% \$ _____

Total: \$_____

Paid: YES / NO

Catering orders must provide Credit Card information to secure your order. Cancellation under 24hrs will incur a 20%. Same day cancellation is fully billable.

Cash / Business Check(No personal Checks)/
Visa Mastercard American Express Discover

Name on Card: _____

Card # _____

Expiration:_____Secuirty Code:_____

Billing Address

I have read, understood, and agree to all terms with Rosa's Deli Catering policy regarding count changes, cancellations, fees, rentals and returns, deliveries and payment as specified.

Signature: _____ Date: _____