y:Friday	Date:12-	13-24	Time: Tpm-11pm
THE LO			INTERNAL USE: Payment Date:
Member First Name:_	Jeffrey/Martin Last Na	ame: Sumners	
Contact First Name:	Last Na	me: (if different than	an member)
Contact Phone:	Mobile: <u>609</u>	<u>-577-0533</u> C	Contact Email: jeffsumners24@gmail.com
EVENT INFORMAT Event Name: Sumn	CION: ners Christmas Party		
•	Event Date: 12		
Anticipated Number o	of Attendees: 60		
Room Reserved: (check	<i>all that apply)</i> □ Byrne Room	☐ Main Dining R	Room □ Bar A/V Required: □ Yes □ No
Room Setup:			
Additional Details: _			
*	es 🗆 No Menu/Price per I plings, Vegetable Spring Rolls	s, Hummus + Veg	eg Platter, Assorted Flatbreads
Additional Details:		\$10 Sumner	er Hot Cider Cocktail
PRICING: Room/Setup Fee:	¢		
Food + Beverage Fee:	\$ 710.00	•	\$ Date:
Subtotal:	\$_710.00	Balance Due: \$	\$ Date:
Tax:	\$_47.00		
Gratuity:	\$_142.00		
Total:	\$ 899.00		
Terms & Condit	TIONS:		
 Booking & Guest Cour Events must be book including menu and Final guaranteed guest Payments: Deposit of \$500 is companied. Final/balance payments 		• If ca The if rel • If ca All food allowed.	
 Additional guests wind APPROVAL: 	If be charged the day/hight of event	· For dune	fets, food will be replenished for a maximum of 2 hours.
			Date:

_____ Date: ___

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TLC/Apex Signature: