Banquet Event Order

Event Name:			
Date:			
Time:			
Location:			
Government Department/Agency:			
Event Contact Name:			
Contact Phone:			
Contact Email:			
Attendance			
Expected Number of Guests:			
VIPs/Dignitaries:			
Event Schedule			
Time	Activity/Agenda		
Menu Selection			
Meal Course	Description	Dietary Notes	
Audio/Visual & Eq	uipment Needs		
Equipment Required:			