Holiday Party BEO Form

Event Information

Event Name	
Event Date	
Event Time	
Location	
Contact Person	
Contact Phone	
Guest Details	
Number of Guests	
Age Group	
Food 9 Deverage	
Food & Beverage	
Menu Details	
Allergies/Dietary Restrictions	
Payorago Dataila	
Beverage Details	

Room Setup Instruc	ctions		
AV Requirements			
Schedule of	f Events		
Time	Activity	Notes	
Special Inst	ructions		
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