

"Taste & Toast the Town" Beverage Form

Instructions:

Please indicate the beverage you would like to serve at the September 16th event and indicate what catering equipment you may need. We will contact you to confirm.

Please complete this form and mail to:

"Taste & Toast the Town" • 380 Washington Avenue, Roosevelt, NY 11575

or fax it to 516-223-3384

Name : _____

Beverage: _____

Contact Name: _____ Phone: _____

E'mail: _____

Address: _____

Would you like to participate in our wine judging? _____

Catering Equipment:

Please indicate the quantity of each piece of equipment that you will need. *

Service (if applicable)

Qty: Items:

___ Glasses (please note size) _____

___ Other _____



Tables Needed

Qty:

___ six foot tables

Ice

Qty:

___ ice ___ lbs. What product is being chilled?

How much product?

___ plastic chilling tub, 18-inch by 22-inch; 15-inch deep

Would you be willing to donate items or a basket to be used in our raffle?

Yes ___ No ___ Description: _____

Special Requests: _____

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Would you be willing to donate items or a basket to be used in our raffle?

Yes ___ No ___ Description: _____

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"Taste & Toast the Town" Restaurant/Bakery Form

Instructions:

Please indicate the dish you would like to serve at the September 16th event and indicate what catering equipment you may need. We will contact you to confirm.

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"Taste & Toast the Town" • 380 Washington Avenue, Roosevelt, NY 11575

or fax it back to us at to 516-223-3384

Restaurant/Bakery Name : _____

Dish: _____

Contact Name: _____ **Phone:** _____

E-mail: _____

Address: _____

Would you like to participate in our food judging? Yes No

Would you be willing to donate a Gift Certificate for our raffle? Yes No

Catering Equipment:

Please indicate the quantity of each piece of equipment that you will need.

Buffet Service

Qty: Items:

___ chafing dish with one insert, 8-quart

___ chafing dish, 8-quart round (used for soups)

___ sterno for chafing dish ___ serving fork, stainless

___ serving spoon, stainless ___ tongs, stainless

___ punch ladle, stainless



Ice

Qty:

___ ice ___ lbs. What product is being chilled?

___ plastic chilling tub, 18-inch by 22-inch; 15-inch deep

Tables Needed

Qty:

___ six foot tables

Special Requests: _____

"Taste & Toast the Town" Restaurant/Bakery Form

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Restaurant/Bakery Name : _____

Dish: _____

Contact Name: _____ **Phone:** _____

E-mail: _____

Address: _____

Would you like to participate in our food judging? Yes No

Would you be willing to donate a Gift Certificate for our raffle? Yes No

Catering Equipment:

Please indicate the quantity of each piece of equipment that you will need.

Buffet Service

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