



IRISH CENTRE

12546 126 Street, Edmonton, Alberta T5L 0X3

Phone: (780) 453-2249 Fax: (780) 451-5969

Email: culturaldirectoriss@gmail.com OR edmontonirishcentre@gmail.com

EVENT BOOKING FORM - DINNER

<input type="checkbox"/> 1 st time Member (less than 3 months)		<input type="checkbox"/> Member		<input type="checkbox"/> Honorary Member	
<input type="checkbox"/> Non-member			<input type="checkbox"/> External Irish Community Group:		
Name:			Email:		
Phone:			Address:		
City:			Postal Code:		
Event Name:			Date:		
Start Time:		End Time:		Number of Guests (Max 160):	
Included options					
<ul style="list-style-type: none"> • Reserved seating - 6ft rectangle or 5 ft round tables • Decorations permitted • Cake permitted - NO outside food (cutlery, napkins & plates included) 		<ul style="list-style-type: none"> <input type="checkbox"/> Bose PA System w/1 mic & podium <input type="checkbox"/> Computer Projector(s) <input type="checkbox"/> Soundboard w/2 speakers/2 mics & podium <input type="checkbox"/> Stage set up - (for a DJ/Band/etc.) 			
REFUNDABLE DEPOSITS – CATERED			FACILITY BOOKING FEE - CATERED		
<input type="checkbox"/> \$500.00 – All Member Types			<input type="checkbox"/> \$0.00 – External Irish Organization Event <input type="checkbox"/> \$200.00 –Member OR Honourary Member <input type="checkbox"/> \$250.00 – 1 st time New Member <input type="checkbox"/> \$300.00 – Non-Member		
A: FACILITY BOOKING FEE:				\$	
B: - DEPOSIT				\$	
A. + B. = C: TOTAL BOOKING FEE				\$	
PAYMENT FOR DEPOSIT:			PAYMENT FOR BOOKING FEE:		
Minimum of 4 weeks before event date			Minimum of 2 weeks before event date		
<input type="checkbox"/> EFT – edmontonirishcentre@gmail.com			<input type="checkbox"/> EFT – edmontonirishcentre@gmail.com		
Notes:					
Date:			Completed by:		



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CATERING FORM – DINNER

EVENT TITLE:		DATE:
Doors open:	Estimated # Adults:	Estimated # of U12:
Bar service start time:	Number of bar staff required:	Food service start time:
Presentation/Speeches timeline:		Entertainment/Music timeline:

<p>Standard Buffet Order \$39.00 per adult plate Includes:</p> <ul style="list-style-type: none"> ✓ 1 meat selection ✓ 1 starch selection ✓ 1 salad selection ✓ 2 Vegetables ✓ Dinner buns ✓ Coffee & Tea 	<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr style="background-color: #fce0d0;"> <th colspan="4"><i>Dinner Buffet Order sheet</i></th> <th>\$/person</th> <th># ordered</th> <th>Total \$ per line</th> </tr> </thead> <tbody> <tr> <td colspan="4">Standard Buffet Order (total # of guests)</td> <td>\$39.00 x</td> <td>#</td> <td>\$</td> </tr> <tr> <td colspan="4">Add 2nd Meat selection</td> <td>\$7.00 x</td> <td>#</td> <td>\$</td> </tr> <tr> <td colspan="4">Add 2nd Starch selection</td> <td>\$3.50 x</td> <td>#</td> <td>\$</td> </tr> <tr> <td colspan="4">Add 2nd Salad selection</td> <td>\$3.75 x</td> <td>#</td> <td>\$</td> </tr> <tr> <td colspan="4">Add 3rd Vegetable selection</td> <td>\$4.00 x</td> <td>#</td> <td>\$</td> </tr> <tr> <td colspan="4">Add Assorted Dessert Squares</td> <td>\$3.00 x</td> <td>#</td> <td>\$</td> </tr> <tr> <td colspan="4">Add Assorted Pies w/whipped cream</td> <td>\$5.00 x</td> <td>#</td> <td>\$</td> </tr> <tr> <td colspan="6" style="text-align: right;">Total cost</td> <td>\$</td> </tr> <tr> <td colspan="6" style="text-align: center;">(Total Cost Per Person: TCPP)</td> <td>\$</td> </tr> <tr> <td>Calculation for U12</td> <td>(TCPP x U12#/-2)</td> <td>U12#:</td> <td>Deduct 50%</td> <td colspan="3">\$</td> </tr> <tr> <td colspan="6" style="text-align: right;">D. BUFFET SUBTOTAL:</td> <td>\$</td> </tr> </tbody> </table> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr style="background-color: #e0f0ff;"> <th colspan="2">Lunch Options</th> <th>Serving time:</th> </tr> <tr> <th colspan="2"><i>1 Tray serves 30 people</i></th> <th>Total \$ per line</th> </tr> </thead> <tbody> <tr> <td>Build your own Cold Cut Combo on a bun – mixed meat trays of roast beef, black forest ham & turkey with pickles, mayo, mustard, butter and buns on the side.</td> <td style="text-align: right;">\$120.00 X _____</td> <td>\$</td> </tr> <tr> <td>Assorted Cheese & Cracker Tray</td> <td style="text-align: right;">\$90.00 X _____</td> <td>\$</td> </tr> <tr> <td>Seasonal Fruit Tray - w/yogurt dip</td> <td style="text-align: right;">\$80.00 X _____</td> <td>\$</td> </tr> <tr> <td>Assorted Vegetable Tray - w/ranch dip</td> <td style="text-align: right;">\$70.00 X _____</td> <td>\$</td> </tr> <tr> <td colspan="2" style="text-align: right;">E. LATE LUNCH OPTION SUB-TOTAL:</td> <td>\$</td> </tr> <tr> <td colspan="2" style="text-align: right;">D. BUFFET + E. LATE LUNCH = F. FOOD ORDER SUB-TOTALS</td> <td>\$</td> </tr> </tbody> </table>	<i>Dinner Buffet Order sheet</i>				\$/person	# ordered	Total \$ per line	Standard Buffet Order (total # of guests)				\$39.00 x	#	\$	Add 2 nd Meat selection				\$7.00 x	#	\$	Add 2 nd Starch selection				\$3.50 x	#	\$	Add 2 nd Salad selection				\$3.75 x	#	\$	Add 3 rd Vegetable selection				\$4.00 x	#	\$	Add Assorted Dessert Squares				\$3.00 x	#	\$	Add Assorted Pies w/whipped cream				\$5.00 x	#	\$	Total cost						\$	(Total Cost Per Person: TCPP)						\$	Calculation for U12	(TCPP x U12#/-2)	U12#:	Deduct 50%	\$			D. BUFFET SUBTOTAL:						\$	Lunch Options		Serving time:	<i>1 Tray serves 30 people</i>		Total \$ per line	Build your own Cold Cut Combo on a bun – mixed meat trays of roast beef, black forest ham & turkey with pickles, mayo, mustard, butter and buns on the side.	\$120.00 X _____	\$	Assorted Cheese & Cracker Tray	\$90.00 X _____	\$	Seasonal Fruit Tray - w/yogurt dip	\$80.00 X _____	\$	Assorted Vegetable Tray - w/ranch dip	\$70.00 X _____	\$	E. LATE LUNCH OPTION SUB-TOTAL:		\$	D. BUFFET + E. LATE LUNCH = F. FOOD ORDER SUB-TOTALS		\$
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Beverage/Alcohol/Bar Service Options				
<i>Included with Dinner catering order- Please select option</i>	COFFEE URN	<input type="checkbox"/>	COFFEE PODS-Keurig	<input type="checkbox"/>
	TEA URN	<input type="checkbox"/>	TEA BAGS-Kettle	<input type="checkbox"/>
DINNER WINE	<input type="checkbox"/> Bottles on the table – added to each table for dinner service – ordered in advance			
POUR AS YOU GO WINE	<input type="checkbox"/> Wine poured during dinner service only – total # of bottles opened added to this invoice after dinner			
<i>Wine Options: Check with bar liaison for current selections</i>	\$/Bottle	#/Ordered/ poured	Name of Wine	Total \$ per line
Red Wine – 750ml Bottle – 4oz glasses = 6 servings	\$TBD	#		\$
White Wine – 750ml Bottle – 4oz glasses = 6 servings	\$TBD	#		\$
G. WINE ORDER SUB-TOTAL:				\$
ADD - SELF SERVE – 7 UP & ORANGE JUICE MIX	8L Beverage Dispenser – (max 2)	\$/Dispenser	#/Ordered	Total \$ per line
		\$25.00	#	\$
H. JUICE ORDER SUB-TOTAL:				\$
HOST BAR OPTIONS	<input type="checkbox"/> No Host Bar <input type="checkbox"/> Host gives drink tickets to guests. A tab is run at bar – 15% gratuity added to tab at end of event <input type="checkbox"/> Host has an open tab at the bar. – 15% gratuity added to tab at the end of event <ul style="list-style-type: none"> <input type="radio"/> Limit total estimate including 15% gratuity: \$ _____ <input type="radio"/> N/A for No \$ Limit total 			
Please indicate which Drink Types that can be added to a host bar tab				
<input type="checkbox"/> Hi-balls		<input type="checkbox"/> Wine		
<input type="checkbox"/> Domestic Draft		<input type="checkbox"/> Coolers/Ciders		
<input type="checkbox"/> Import Draft		<input type="checkbox"/> Bottle Beer		
<input type="checkbox"/> Cocktails		<input type="checkbox"/> Pop/Juice/0.5%		
<input type="checkbox"/> Top Shelf (Whiskey/Scotch/Brandy/Aperitifs/Sherry/Tequila/Shooters)				
F. FOOD ORDER + G. WINE + H. JUICE = J. FOOD & BEVERAGE SUB-TOTALS				\$
ADD 15% GRATUITY				\$
K. FOOD & BEVERAGE SERVICE TOTAL				\$



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Optional/Additional		
<i>ADDITIONAL SERVICES</i>	\$/per	Total \$ per line
(Service Requirement: 1 Beverage Server per 50 people) Server(s) X ____ - in addition to regular staffing complement and/or outside of regular operating hours (To be discussed/may not be applicable)	# ____ X \$15.00/hr.	\$
Bartender 1 Shift time:		
Bartender 2 Shift time:		
White or Black Linen Tablecloths for tables # ____ Rounds – max 12 # ____ Rectangle – max TBD	# ____ X \$8.00	\$
White Linen Napkins for dining tables –	# ____ X \$1.25	\$
Plastic Tablecloths for Round Tables only Colour(s): White – Green – Orange # ____ Rounds – max 12	# ____ X \$6.00	\$
Plastic Tablecloths for Rectangle Tables only Colour(s): White – Green – Orange # ____ Rectangle – max TBD	# ____ X \$3.25	\$
Centerpiece rental – <input type="checkbox"/> Client agrees that if centerpiece is missing or damaged that a \$25/centerpiece fee will be deducted from the \$500 Deposit – Extra fees may be charged if this fee is exhausted – tea lights not supplied	# ____ X \$5.00	\$
L: OPTIONAL ADD-ON SUB-TOTAL		\$
K. FOOD & BEVERAGE SERVICE TOTAL		\$
L. +K. = M: TOTAL CATERING INVOICE		\$
Payment in full for special food order due 2 weeks before event	<input type="checkbox"/> EFT – edmontonirishcentre@gmail.com	



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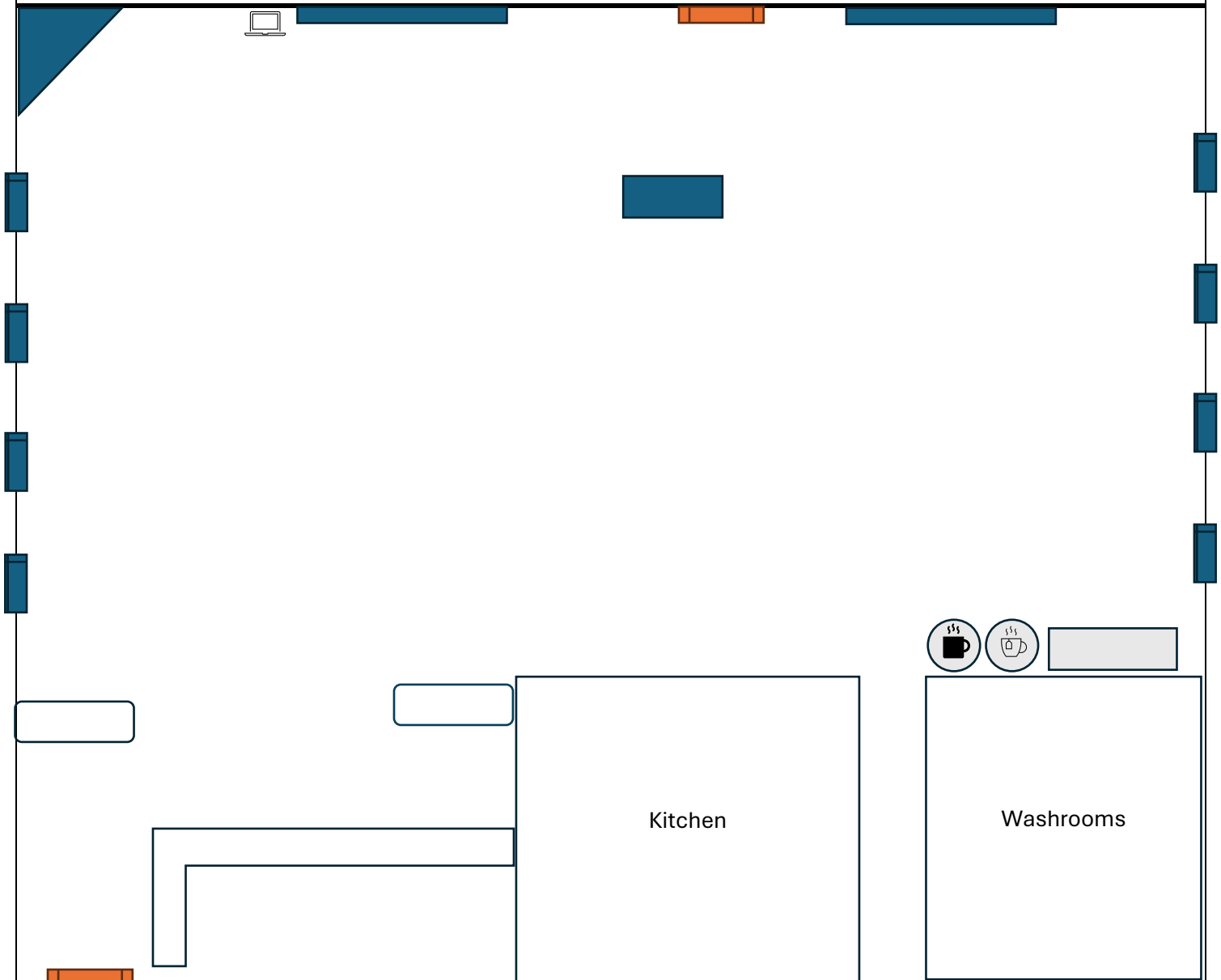
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Room decorating & table dressing plan: Please note: If changes/additions/deletions to the seating are required for your event, clients will need to provide the labour for this task. ISSS staff will be on site to assist, but room set up is the responsibility of the client.



Room teardown and room reset plan: If there are events that immediately follow your event, the room may need to be adjusted back to its original set up before your event began. Please review with ISSS staff as needed.



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Facility Rental Agreement

1. All bookings during regular operating hours are considered semi-private to keep the club accessible to all our members.
2. Unless previously booked by the Irish Sports and Social Society, any costs associated with booking bands, DJs, or other forms of entertainment for your scheduled event are the responsibility of the renter named on this agreement.
3. **Renter on this agreement must be present at the event for the duration scheduled**
4. Renter acknowledges that no outside food (other than event cake) or outside drink is permitted.
5. Renter agrees not to affix décor or signage to club property with nails, screws or staple guns and agrees to remove all décor and signage directly following the event
 - a. Decorations may be attached to walls and doors using PAINTER’S MASKING TAPE only.
 - b. NO CONFETTI or CONFETTI BALLOONS inside or on Club premises is permitted.
 - c. Any balloons brought into the space must be removed at the end of the night due to the sensitivity of our security sensors or an additional call out fee of \$50 will be assessed against the renter’s deposit total.
 - d. Any items left behind after the event will become property of the club to be disposed of at its sole discretion unless arrangements to remove items after the event has been prearranged.
6. The Irish Sports and Social Society shall not be liable for liability or damage claims for injury to persons or property from any cause relating to the occupancy of the facility by the renter named on this agreement, including those arising out of damages or losses occurring on sidewalks and other areas adjacent to the facility during the term of this rental agreement or any extension of such term.
7. The deposit for your booking is fully refundable, but a \$50.00 cleaning fee will be charged if the event space is not left in good order, or in extreme custodial cases, the entire \$200.00 deposit for your event will be forfeited.
8. A refundable deposit is required a **minimum of 4 weeks prior** to the date of event to secure the date.
9. The room rental fee and 100% of the catering costs are due a **minimum of 2 weeks prior** to the date of the event or the event will be cancelled and the deposit returned.
10. All catering items must be finalized a **minimum of 2 weeks prior** to the date of the event booking.
 - a. A 15% gratuity will be added to all catered food & beverages orders.
 - b. A 15% gratuity will be added to the beverage/alcohol tab for hosts who run a tab for their guests attending their event.

Signatures

By signing below, the RENTER acknowledges having read and agrees to the contents of this contract.

Date:		Renter’s Full Name:	
		Renter’s Signature:	
		ISSS Representative Name and Position:	
		ISSS Representative Signature:	