nxt door
PRIVATE EVENTS

Name: _____ Event Date: _____

Phone: _____ Event Time: _____

Email: _____ Event Type:_____

Number of Guests: _____ Package: _____

MENU, ALLERGIES

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Kids: _____

Kids Menu: _____

ADD ONS

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_____

Total: _____

Auto Gratuity: _____

Deposit:_____

Paid On: _____

Signed By: _____

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