

Private Dining Dinner Contract

Please fill out the information below: Submit with deposit.

GROUP NAME / OCCASION _____

DATE OF PARTY _____

CONTACT NAME _____

ARRIVAL TIME _____ Host / Hostess

PHONE NUMBER _____

_____ Guests

CELL PHONE NUMBER _____

EMAIL _____

Drinks: ___ Open bar ___ Cash Bar ___ Wine with Dinner ___ Champagne Toast

Additional Appetizers & Soups: _____

Menu Choice: 1. _____ Price Per Guest \$ _____

_____ Children's Menu: Chicken tenders and fries, soft drink, and dessert \$ _____

_____ Special Dietary Needs: _____

TOTAL GUEST COUNT _____ (Please confirm the number of meal selections one week in advance).

Additional Charge: ___ Appetizer Sampler or ___ Prime Rib Au Jus

Additional Charge: ___ Celebration Cake (1/4 sheet cake) Writing on Cake _____

Additional Charge: ___ Dessert Tray (variety for guests to select from)

Dining Room

Table Arrangement

Please call us and we will assist you with the room layout.

Things to consider:

___ Appetizer Table ___ Wheelchairs ___ Cake Table

___ Gift table ___ Centerpieces ___ Highchairs

Will there be a presentation? ___ Screen Rental \$35.00

Private Room Food and Beverage Minimum

___ Wednesday thru Sunday 1:00 – 4:00 \$800.00

___ Friday and Sunday evening After 4:00 \$1500.00

___ Saturday evening After 4:00 \$2500.00

___ Early Opening Fee - \$50.00 per half hour ___ Wedding ceremony Fee \$300.00

Deposit: Amount \$ ___ Credit Card _____ Check # _____

Signature _____ Date _____

114 Speer Street, Belle Vernon PA 15012

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* Prices are subject to change *