

**Stefanina's-Troy**  
**180 Main Street-Troy, MO 63379**  
**(636)528-6200**

**Catering Contract**

***This contract must be signed in order to have a confirmed event***

Today's Date- \_\_\_\_\_

Clients Name- \_\_\_\_\_

Clients Address- \_\_\_\_\_

\_\_\_\_\_

Phone #

(home) \_\_\_\_\_ (work) \_\_\_\_\_ (cell) \_\_\_\_\_

Deposit/Date Paid- \_\_\_\_\_

Confirmed Head Count- \_\_\_\_\_

Event- \_\_\_\_\_

Event Date- \_\_\_\_\_

Arrival Time- \_\_\_\_\_

Time Food is Served- \_\_\_\_\_

Departure Time- \_\_\_\_\_

50% Deposit due- \_\_\_\_\_

**Set Up:**

Linen Color (upcharge  
for anything but white) \_\_\_\_\_

Linen Napkins- \$ \_\_\_\_\_ # \_\_\_\_\_

Napkin Color- \_\_\_\_\_

Decorations- Done by customer unless otherwise  
stated

Podium- \_\_\_\_\_

Dance Floor- \_\_\_\_\_

Gift Table- \_\_\_\_\_

Head Table- \_\_\_\_\_

Music- We provide Muzak

# *Catering Contact Continued*

*Menu Option #* \_\_\_\_\_

*Entrée-*

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*Side/Vegetable-*

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*Salad-*

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*Rolls-*

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*Dessert-*

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# *Catering Contract Continued*

*Bar Option #* \_\_\_\_\_

*Beer-* \_\_\_\_\_

*Wine-* \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Call Liquor-* \_\_\_\_\_  
\_\_\_\_\_

*Bar Opens at-* \_\_\_\_\_

*Bar Closes at-* \_\_\_\_\_

*Thank You!*

*Both the client and caterer are aware of and agree to the  
aforementioned terms and conditions.*

*Signature of Client*

\_\_\_\_\_

*Signature of Caterer*

\_\_\_\_\_

*Date of Agreement*

\_\_\_\_\_