

Sonoma Grill and Banquet Room Booking Contract

Personalized menu heading: _____

Group _____ Contact Person _____

Ph. Number _____ Fax Number _____

Email Address _____

Mailing
Address _____

Date of Party: _____ Time of Arrival: _____

Room: _____ Room rental fee \$ _____

Dinner Service starting: _____ Menu: _____ Cost \$ _____

Soup/Salad choice: _____ Dessert Choice: _____

Table arrangements: _____ Wine req. _____

Est. # of People and Child. _____ Confirmed 7 Days Prior: _____

Cake service?: _____ Food Allergies? _____

Billing requirements: _____ Host bar? _____

Special Requirements _____

Credit card # with a 20% non-refundable deposit is required to hold reservation. Please-
no confetti type decorations. Any variations in number of guests confirmed will result in
(confirmed number-attendees x 50% + number attended). Personal cheques not accepted

Credit card type _____ # _____

exp ____/____ Signature _____

Paul Mangat, Sonoma Banquet room Sig. _____

Function Coordinator _____ Sig. _____

Date: _____ 2010
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