Classique Banquet Hall

RESERVATION REQUEST FORM

Today's Date:

| | | | | | and the Constant of the Constant | CENTER OF THE PARTY OF THE PART | |
|---|--|--|----------------|----------------------|----------------------------------|--|--|
| Group/Organiza | ation Name: | | | | | | |
| Name of Event: | | | | | | | |
| Primary Contac | t Name: | | | | | | |
| Address: | | | | | | VIII (MARKET) | |
| City, State, Zip: | A BANGARAN AND A BANG | | | | | | |
| Contact #: | | and the second s | , | Alternate #: | | | |
| Email Address: | | | | | | | |
| Event Date: | | | Type of Event: | | | | |
| Event Start Time: | | | | Event End Time: | | | |
| Expected # of Attendees: | | | | Head Table #: | | | |
| Access Request (Please note this time w | ted By: rill be included in rental p | eriod) | | 1% | | | |
| | | | | | | | |
| Deposit | Nonrefundab | <u>PACKAGE I</u> | REQU | ESTED: | | | |
| | BANQUET RO | OOM ONLY: | | | GOLD PACKAG | GE: | |
| ☐ 100 guests | ☐ 200 guests | ☐ Flip Room | | ☐ 100 guests | ☐ 150 guests | ☐ 200 guests | |
| | SILVER PA | CKAGE: | | CL | LASSIQUE PACE | (AGE: | |
| ☐ 100 guests | ☐ 150 guests | ☐ 200 guests | | ☐ 100 guests | ☐ 150 guests | ☐ 200 guests | |
| Chair Cov | ere Saches Tah | ale Cloths and Hurricane | Cent | erpieces (these ar | e included with a | ny of the packages) | |
| <u>Chair Covers, Sashes, Table Cloths and Hurricane Centerpieces (these are included with any of the packages)</u> ☐ 50 guests ☐ 100 guests ☐ 150 guests ☐ 200 guests ☐ Flip Room | | | | | | | |
| | | al fee includes set-up and bre | eakdov | vn. * Security & Cle | aning is additiona | ı. | |
| | | | | | | | |
| EQUIPMENT REQUIREMENTS: The following equipment may be available at an additional cost. The use of one corded microphone and a podium is complimentary. | | | | | | | |
| | | ☐ Cordless Microphone | | CD Projector/Scree | | | |
| | | CAT | EDINI | 2, | | | |
| <u>CATERING:</u> ☐ Yes ☐ No ☐ In-house ☐ Outside Caterer | | | | | | | |
| | ıf. | you prefer your own caterer, | they n | nust be licensed and | l insured | | |
| | | ALC: | оноі | | | | |
| | ☐ Yes ☐ | | | nsed and Insured | (Security require | ed)* | |
| | DIEACE | INDICATE ANY ADDITÍON | אאו כי | OMMENTS OR SI | PECIAL NEEDS: | | |
| | FLEMSE | INDICATE ANT ADDITION | .AL C | | 200121122001 | | |
| | | | | | | | |
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Classique Chanquet Hall WEDDING RECEPTION REQUEST FORM

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To request more wedding information from us, simply fill out the form below and email to ClassiqueBanquetHall@gmail.com or fax to 678-759-1044.

| Name of Bride: | | | | | |
|---|--|--|--|--|--|
| Name of Groom: | | | | | |
| Today's Date: | | | | | |
| City: | State: Zip Code: | | | | |
| Phone Number: | Email: | | | | |
| Date of Wedding: | Is the date flexible: | | | | |
| Theme of Wedding: | Budget: | | | | |
| Wedding Party Count: | Number of Guests: | | | | |
| Color(s): | | | | | |
| | End Time: | | | | |
| Event(s) you're looking for: Ceremony | ☐ Reception ☐ Dance ☐ Other | | | | |
| Flowers: Yes No Centerpiece Desire: Yes No Number at Head Table | | | | | |
| A/V Equipment: ☐ Microphone ☐ Screen | ☐ Laptop ☐ Overhead ☐ Led Projector | | | | |
| DJ or Band Service: ☐ Yes ☐ No | Wine/Punch Required? ☐ Yes ☐ No | | | | |
| Cash Bar Required? □ Yes □No | Time Bar Should open: ☐ Yes ☐ No | | | | |
| Beer/Liquor Tickets? | If yes, how many would you like to purchase? | | | | |

Deposit Nonrefundable