**GROUP**

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| --- | --- |
| **BEO #:** | ###### |
| **Created** | DD/MM/YY |

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| **Account:** **Post As:** **Address:** | Account NameEvent Name1234 Street NameCity, State, 00000 | **Contact:** **Phone:****Fax:** **On-Site:** **Phone:** **Fax:**  | Name555-123-4567555-123-4567Name, Title555-123-4567555-123-4567 |
| **Event Date:** | mm/dd/yyyy |
| **Deposit:****Billing Method:** | Direct Bill | **Catering Src:** | Name |

|  |  |  |  |  |  |  |  |  |  |  |
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| **DATE** | **TIME** | **ROOM** | **EVENT** | **FUNCTION** | **SET-UP** | **EXP** | **GTD** | **SET** | **RENTAL** | **POST** |
| DD/MM/YY | Start: | 00:00PM |  | Event Type or Name | XXX |  | ### | ### |  |  | Y |
| End: | 00:00PM |

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| --- | --- |
| **Menu Selections** | **Setup Requirements** |
| **Start:** | 12:00PM | **End**  | 01:00PM | **Function** | XXX | Rounds of 8 |
| Menu itemMenu itemMenu itemMenu itemMenu itemMenu itemMenu itemMenu itemMenu itemMenu itemMenu item | Lorem Ipsum Dolor RequirementLorem Ipsum Dolor RequirementLorem Ipsum Dolor RequirementLorem Ipsum Dolor RequirementDetails lorem ipsum dolor sit amet lorem ipsum. Details lorem ipsum dolor sit amet lorem ipsum. |
| **Entertainment, Décor and Miscellaneous** |
| Lorem Ipsum Dolor Requirement |
| **Beverage Selections** | **Audio Visual Requirements** |
| Menu itemMenu itemMenu itemMenu item | Lorem Ipsum Dolor RequirementLorem Ipsum Dolor RequirementLorem Ipsum Dolor Requirement |

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|  |  |  |  |
| **Organization Authorized Signature** | **Date** |  | **Catering Src Name** | **Date** |

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| **BEO #:** | **######** |