

NAME OF EVENT  
CELEBRATING-

DATE

1

TABLE NO.	1	Name	Adults	Children		HC/Chair
			5			
			5			
		<b>Total</b>	10			

TABLE NO.	2	Name	Adults	Children		HC/Chair
			2	1		
			2	1		1
			1			
			2	1		
		<b>Total</b>	8	3		

TABLE NO.	3	Name	Adults	Children		HC/Chair
			2	1		1
			2	3		
			3	1		
		<b>Total</b>	7	5		

TABLE NO.	4	Name	Adults	Children		HC/Chair
			2	2		
			2	2		2
			2	1		1
		<b>Total</b>	6	5		

Cancellations of numbers are accepted two days before the function.

Cancellations made on the day of the function must still be paid in full.

Please pay group party, day before the event day

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