



Booking Form-Event Checklist

Date and Time: _____

Purpose/Name of Event: _____

Contact Person name AND phone number: _____

Number attending: _____ Adults: _____ Kids: _____

Which area/room? _____

Deposit amount required: _____

Room Rental Cost: _____

Room Rental Paid: Yes _____ No _____ Is deposit paid the room rental? _____

Does room rental need to be added or subtracted from Bill at the time of event? _____

Drink tickets: Yes _____ No _____ How many? _____

Cost limit per drink ticket and/or Corkage Fees? _____

One Bill or Individual Bills? _____

Buffet Dinner (with gratuity included) or Off Menu? _____

Time of dinner? _____

Guest arrival time/Cocktails time/ Ordering Times? _____

Curling/Golfing times? _____

Full set up with linens? _____

Projector required and or/Laptop? _____

Mic required? _____

Special Requests/Notes:

Contact person Signature

PGGCC Representative Signature
