# PARTY FOOD MENU FORM 

Please complete in BLOCK CAPITALS.
Tel: 01908377251

| CUSTOMER DETAILS |  |
| :--- | :--- |
| PARENT/ORGANISER NAME: | PARTY DATE: |
| CONTACT PHONE NO:: | USE OF TEA ROOM REQUIRED: Y/N |
| CONTACT EMAIL: | FOOD SERVICE TIME: |
| AGE OF CHILD: | NO. OF MEALS REQUIRED: |

You are required to cater for the the total number of children attending your party. A minimum of 15 food orders must be placed to receive free use of the tea room.
ALLERGENS: Please inform us if anyone attending the party has a food allergy or has any special dietary requirements.


| Meal Choice - choose any six | Tick |
| :--- | :--- |
| Cheese, ham, jam sandwiches |  |
| Cheese and tomato pizza bites |  |
| Fruit platter (grapes/oranges) |  |
| Carrot and cucumber batons |  |
| Sausage rolls |  |
| Cocktail sausages |  |
| Chicken nuggets |  |
| Crisps |  |
| Cookies |  |
| Doughnuts |  |
| Chocolate mini rolls |  |
| Ice-cream tubs |  |


| FINAL ORDER TOTAL |
| :--- |
| Type No. Unit Cost Total $£$ <br> Meals  $£ 5.50$  <br> Tea Flask - <br> serves 8  $£ 6.50$  <br> Coffee Flask - <br> serves 8  $£ 6.50$  |


| FOR OFFICE USE ONLY |  |  |  |
| :--- | :--- | :--- | :--- |
| Amount paid $£:$ |  | Staff name: |  |
| Date paid: |  | Receipt no: |  |
| Special dietary requirements: |  |  |  |

