

## The Catering Department The Royal Marsden Foundation Trust



### **SUTTON AND CHELSEA**

FUNCTION B	OOKING F	ORM	
Name of Organiser:	Ext.:		
Department:	E-mail Address:		
Name of Meeting:			
Room:	Catering Use Only		
Site:		<u>Date</u>	<u>Initials</u>
Date:	Rec'd		
Day:	Entered in diary		
RMH: W(Please provide cost centre only)	E-mail confirmat	ion date	
Royal Marsden Cancer Charity: (Please provide Charity Fund code)	Sent by		
ICR & Other: (Please provide account code & cost centre)			
Invoice Address:-		Invoice No.:	-
PLEASE READ THESE NOTES PRIOR	TO COMPLET	ING THIS BOO	KING FORM
<ul> <li>All requests for catering service can only be accepte</li> <li>All menus are priced per head exclusive of VAT at the working days prior to the function date.</li> <li>Final numbers must be notified to the Catering Office requirement. Please see general information regard</li> <li>Cancellation of confirmed orders will only be accepted.</li> </ul>	ne current rate. Bo e at least 2 workin ling cancellations.	pokings for buffets	

- The completed booking form must be authorised with a budget code and signature or name and address for invoicing.
- The cost of a buffet includes table linen, china, cutlery, glassware and disposables. Staffing costs will be added where applicable.
- All Bookings will be confirmed by return e-mail.
- Please note failure to return issued crockery/cutlery will result in the losses being charged to the budget code/invoice.

Minimum	Charge	per	booking	is	£10.00
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Budget holder's Signature:	Date:
Budget holder's Name:	(Block Capitals Please)

### **CATERING REQUIREMENTS**

Please enter the time/s you require your refreshment/s in the shaded areas below. Enter in the corresponding boxes the numbers required:-

Time refreshment required:-	1	2	3	Catering Use Only
	Number of each required	Number of each required	Number of each required	
Coffee				
Tea				
Biscuits				
Sandwiches 1 round per person				
Still Water Litre				
Sparkling Water Litre				
Orange Juice Litre				

# Minimum Charge per booking is £10.00

If you require any further items please specify below including the preferred delivery time and the amount: -
Food:
Beverages:
Special Requirements