

## **EVENT RESERVATION AND AGREEMENT FORM**

Date of event//	Day		Time	eA	M/PM
Contact person		Today's Date	e/_		
Group/Event name					
Personalized greeting information _					
Telephone ( ) -		Mobile ( )	-		
Fax number ( ) -		E-Mail			
Cocktails/wine included before ever	nt?Yes	No			
Cocktails/wine included during ever	t?Yes	No			
Event dining area	*				
Number of guests	Menu fee \$	per person**			
Deposit amount \$***	Credit card No			_(Visa/MC/A	mex)
Expiration date/	Security code				
<ul> <li>To reserve a private dining room</li> <li>Corkage fee is \$15 per 750ml with a r</li> </ul>		\$75	0 Dinner_	(initial)	
** 20% Gratuity and California sales	tax will be added to	the final bill(i	nitial)		
*** Cancellations will be accepted 7 count must be provided to Bella Vita guest based on this number and Bella Additional guests will be billed at the	48 hours prior to th a Vita will not be res	e event. You will be sponsible for fewer	billed, at than antic	the minimum	, per
Any special equipment/service procu charges to the client. In addition, any event will be the responsibility of the	loss or damage tha	t may result during			
Special instructions:					
Customer name and signature		Manager name and signature			