



# FUNCTION ORDER FORM

Lodge Name :  
 Contact Person:  
 Position :  
 Mobile Number:  
 Telephone no.:  
 Fax no.:  
 E-mail:  
 Type of Function:  
 No. of paxs Booked:  
 No.of paxs attended  
 Dinner be served at:


Function / Event Date:

Venue:

Menu :

<input type="checkbox"/>	A menu	<input type="checkbox"/>	B Menu
<input type="checkbox"/>	Premier Menu	<input type="checkbox"/>	Healthy Menu
<input type="checkbox"/>	*Weekly Set Dinner Menu		
<input type="checkbox"/>	From Master Menu		

Numbers of Main Course Booked:	M	AM	V	A	
Numbers of Main Course Served:	M	AM	V	A	

**Original Menu Reserved/Confirmed**

Note: M=Main course confirmed  
 AM=Alternative main course  
 V=Vegetarian main course  
 A=Asian main course

Deposit:

Set up requirement (If any)

<input type="checkbox"/>	Flower	<input type="checkbox"/>	Display Items
<input type="checkbox"/>	Colour Candle	<input type="checkbox"/>	Music
<input type="checkbox"/>	Photographer	<input type="checkbox"/>	Screen
<input type="checkbox"/>	Table Setting	<input type="checkbox"/>	Projector

Details/ Remarks:

Note:

a) Soonest we received your confirmed menu, we will advise you the alternative main course and vegetarian main course available.  
 b) JW please kindly confirm us exact nos. of main courses, alternative main courses and vegetarian main courses required to prevent any food wastage, delay in service and additional charges may be incurred.

Wine:

Office use:

Order Taker:	Date:
Kitchen staff:	Date:

**Programme/ Other arrangement/Additional cost:**

Customer's signature : \_\_\_\_\_  
 (Confirmed and accepted by)

Date: \_\_\_\_\_

Copy to GM office, Account Dept, Kitchen

Kitchen official use: \_\_\_\_\_

**Note : Weekly Set Dinner Menu is restricted to Side Orders less than 10 covers used only**