

Date Submitted: _____ OK'd By: _____

DWYC – EVENT REQUEST (Member, Non-member & Port Prepaid Events)

Please provide ALL information requested below and return this form to the Bar Manager **at least 2 weeks prior to your requested event date**. We will contact you soon after receipt to confirm the date and that time is available, then to discuss details regarding food and bar requirements, and costs, etc.

NOTE: If the requested date is less than 2 weeks away, please contact Food & Beverage directly at FandB@dwyc.org. Please **PRINT CLEARLY**. *Thank you!*

Member Name or Group: _____ Member Number: _____

Phone: _____ E-mail: _____

Event Title: _____ Event Date: _____

Start Time: __:____ End Time: __:____ Attendees: Members: _____ Non-Members: _____

Menu Description (i.e., taco bar, pasta bar): _____

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Port Prepaid Event: [Yes] / [No] Member Price PP: \$ _____ Food Retail Cost PP: \$ _____ Club Event Fee: \$ _____

Food Cost: \$ _____ Received by: _____ Approved by: _____ Date Approved: ____/____