**A picture containing scene, gambling house, room

Description automatically generatedConference Services Office of the Guest Services Division**

**Food & Beverage**

**-BSA FUNDED GROUP EVENT DELIVERY INTAKE FORM**

1. **48 Business Hours lead time is required**
2. **The list of attendees or meeting invitation is required for reconciliation purposes and should be submitted with this form to the conference office** [**sscr@bnl.gov**](mailto:sscr@bnl.gov)
3. **All highlighted fields must be filled in**
4. **Original itemized invoices must be sent to the conference office vis interoffice mail**

***Today’s Date*: \_\_\_\_\_\_\_\_\_\_**

|  |  |
| --- | --- |
| BSA Account: |  |
| \*Gratuity: | **Yes □ No □ Amount: $25, $20, or $10 Other\_\_\_\_\_\_\_\_** |
|  | \*BSA allows for up to 20% gratuity. Please note desired tip if any. |
| Contact Name: |  |
| Email: |  |
| Contact Number: |  |
| Type of Event: |  |
| Date of Proposed Event: |  |
| Name of Event: |  |
| Location for Event: |  |
| Number of Attendees: |  |
| Delivery Drop-off & Pickup Time: |  |

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| --- |
| VENDOR to provide service: |
| Menu Details and Pricing: |
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| Special Requests |
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