

# IDEAL

Bar & Grill

106 Beach Street  
Santa Cruz CA 95060  
Tel 831.423.5271 Fax 831.423.3827

Contact Name \_\_\_\_\_

Day / Date \_\_\_\_\_

Company \_\_\_\_\_

Time \_\_\_\_\_

Telephone \_\_\_\_\_

Type of Event \_\_\_\_\_

Fax \_\_\_\_\_

# of Guests \_\_\_\_\_

Address \_\_\_\_\_

**Final Count\*** \_\_\_\_\_

City, State ZIP \_\_\_\_\_

Room Charge \_\_\_\_\_

Visa/MC          AmEx          Cash

*This is a nonrefundable rental fee payable at the time the reservation is made. It is **not** a deposit toward the bill.*

**Continental Breakfast**

**Lunch #1**

**Lunch #2**

**Dinner #1**

**Dinner #2**

**Appetizers:** On Tables \_\_\_\_\_ App Table \_\_\_\_\_

**Alcohol:** Hosted \_\_\_\_\_

1 \_\_\_\_\_ # \_\_\_\_\_

No Host \_\_\_\_\_

2 \_\_\_\_\_ # \_\_\_\_\_

**Wines:** \_\_\_\_\_

3 \_\_\_\_\_ # \_\_\_\_\_

Corkage fee \$10.00, maximum 3 bottles

4 \_\_\_\_\_ # \_\_\_\_\_

5 \_\_\_\_\_ # \_\_\_\_\_

**Table Config:** \_\_\_\_\_

**Entrées:**

1 \_\_\_\_\_ \$ \_\_\_\_\_

**Notes:** \_\_\_\_\_

2 \_\_\_\_\_ \$ \_\_\_\_\_

3 \_\_\_\_\_ \$ \_\_\_\_\_

**Desserts:** \_\_\_\_\_

**Logo / Photo (.tiff or .bmp) / Menu Verbage:** \_\_\_\_\_

Cake Cutting / Plate Fee \$2.00 per person.  
This will be charged on all outside desserts.

**One check will be presented at conclusion of event to be paid in full at that time.  
An 18% gratuity will be added to check.**

**\*Final guaranteed guest count is required 48 hours in advance  
and will represent the minimum billing.**

Signed: \_\_\_\_\_

Booked by: \_\_\_\_\_

Dated: \_\_\_\_\_

Dated: \_\_\_\_\_