



DARBOY CLUB

N9695 County N

Appleton, WI 54915

Ph: 920-734-7010

Fax: 920-734-7031

www.darboyclub.com

darboyclub@yahoo.com

Please fill out his form and return it to the Darboy Club Office at least **21 Days Prior** to your scheduled event. If you have any questions, please call weekdays between 8:30am and 5:00 pm

Date of Banquet _____ Room Booked _____

Name of Group/Business _____

Contact Person _____ Phone _____

Address _____

Total Number of Guests (Including Children & Head Table) _____

Head Table (Yes/No) _____ How Many At Head Table _____

Menu Choice _____ Time Dinner Served _____

Please Check One of the Following Table Selections:

Round _____ (Linen Required) Straight _____
(Note: Cost Is \$.75 Per Person for Linens)

Linen Tablecloths (Yes/No) Napkin Color _____

Will Your Group or Committee Be Running A Bar Tab (Yes/No) _____

Would you like to have free beer & soda after dinner? (Yes/No) _____
If yes, what kind of beer? _____

Will you be having Entertainment? _____ Time? _____

Regis. Table _____ Trophy /Gift/Cake Table _____

Screen _____ Video Cart _____ Easels _____ Raffle Drum _____

***Any use of confetti, liquid string, sequins, or any other substance requiring any extra clean-up will result in an additional clean-up charge determined by the management, and will be added to your bill.**

UNLESS PRIOR ARRANGEMENTS HAVE BEEN MADE, BILLS ARE DUE & PAYABLE BY CASH, CHECK OR CREDIT CARD THE NIGHT OF THE BANQUET.