



UA Student Union Catering Request Form
 sueventplanning@email.arizona.edu
 520-621-1414 Main 520-621-2545 Fax

Client / Organization Information					
Organization / Department			Contact Name		
Address			Email	Phone	
City	State	Zip	Fax	Cell	
Advisor Name (for student groups only)			Email	Phone	
Billing Information					
Organization / Department			Contact Name		
Address			Email	Phone	
City	State	Zip	Fax	Cell	
Account #	Sub Account #	Sub-Object Code		Project Code	
Event Information					
Title of Event		Event Date	Start Time	End Time	
Type of Event		Number of Guests	Room Preference*	1	
		planned	* preference only, not guaranteed	2	
		set	Has Room Been Previously Booked	Yes	No
Catering Needs			Setup Information		
Food	Breakfast	AM Break	Lunch	Block/Conference Table	
	PM Break	Reception	Dinner	Theater/Auditorium	
			Meeting Bevs Only	Classroom	
				Banquet Rounds <input type="checkbox"/> of 10 <input type="checkbox"/> of 8	
				U Shape	
			Hollow Square		
			Reception (Short / Tall Cocktail Rounds)		
			Other _____		
			Setup Needs		
			<input type="checkbox"/> Buffet Linens	<input type="checkbox"/> Standard Plastic	
			<input type="checkbox"/> Table Linens	<input type="checkbox"/> Upgrade Plastic *	
			<input type="checkbox"/> Linen Napkins	<input type="checkbox"/> "A" China *	
			<input type="checkbox"/> Registration Table	<input type="checkbox"/> Display Table	
			Other _____		
Beverage # requested			# requested		
Coffee/Gal	Soft Drinks				
Decaf/Gal	Water/Btl				
Hot Tea/Gal	Water/Gal				
Iced Tea/Gal	Other				
			Requested By:		
			Date:		

Please complete form and fax or email back to the event planning office. We will respond within 3 business days from receipt.