

# Reception Worksheet

Reception Facility \_\_\_\_\_ Phone \_\_\_\_\_  
 Address \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Consultant \_\_\_\_\_ Business Hours \_\_\_\_\_  
 Web Site \_\_\_\_\_ E-mail Address \_\_\_\_\_

## Reception Details

Date of Reception: \_\_\_\_\_ Time: (normally 2 hours after ceremony) \_\_\_\_\_  
 Number of Guests which can be Accommodated: \_\_\_\_\_ On Dance Floor: \_\_\_\_\_  
 Time Room is Available for Early Decoration and Entertainment Setup: \_\_\_\_\_  
 Liquor will be Provided by: You Location - Served by: \_\_\_\_\_  
 Does the Bar Close During Meal Service? Yes No  
 No. of Tables Provided: \_\_\_\_\_ Round or Long Tables: \_\_\_\_\_  
 No. of Chairs Provided: \_\_\_\_\_ No. Seated at Each Table: \_\_\_\_\_  
 Ice Sculpture Available? Yes No - At What Charge? \$ \_\_\_\_\_  
 Linens Provided? Yes No - Centerpieces? Yes No  
 Is Floor Plan Available for Table and Seating Arrangements? Yes No  
 Parking Available? Yes No - Self or Valet \_\_\_\_\_  
 Who Takes Care of Clean Up? \_\_\_\_\_ Extra Charge? \_\_\_\_\_  
 Must Be Out By: \_\_\_\_\_ Additional Time Available for: \$ \_\_\_\_\_

## Catering Checklist

Type of Reception: (sit-down, buffet, hors d'oeuvres, other) \_\_\_\_\_  
 Types of Hors d'oeuvres: \_\_\_\_\_  
 \_\_\_\_\_ Service Time: \_\_\_\_\_  
 Appetizer \_\_\_\_\_ Service Time: \_\_\_\_\_  
 Soup \_\_\_\_\_ Salad \_\_\_\_\_  
 Entrees \_\_\_\_\_  
 \_\_\_\_\_ Service Time: \_\_\_\_\_  
 Vegetables \_\_\_\_\_ Potatoes \_\_\_\_\_  
 Additions \_\_\_\_\_  
 Dessert - Wedding Cake \_\_\_\_\_ Service Time: \_\_\_\_\_  
 Dessert - Other \_\_\_\_\_ Service Time: \_\_\_\_\_

## Service Worksheet

If Buffet, is Bridal Table Served? \_\_\_\_\_ Service Time: \_\_\_\_\_  
 Number of Waiters/Waitresses: (sit-down 1/15-20 - buffet 1/25-30) \_\_\_\_\_  
 Name of Supervisor who will be There: \_\_\_\_\_  
 If Party is Late, will Dinner be Held? Is it a Problem? \_\_\_\_\_

## Miscellaneous Considerations

Make a list of all services/items the caterer/location does not provide that must be covered by you

\_\_\_\_\_

# Reception Worksheet

## Dinner per Person

Number of Guests (adult) _____	Rate per Person _____	Total _____
Number of Guests (children) _____	Rate per Person _____	Total _____
Alcoholic Beverages _____	Rate per Person _____	Total _____

## Catering/Location Costs

Site Rental	\$ _____
Food (from above)	\$ _____
Hors d'oeuvres	\$ _____
Alcoholic Beverages	\$ _____
Other Beverages	\$ _____
Serving Personnel	\$ _____
Bartenders	\$ _____
Valet Parkers	\$ _____
Ice Sculpture	\$ _____
Cookies/Traying Fee	\$ _____
Linens	\$ _____
China	\$ _____
Chafers	\$ _____
Rentals	\$ _____
Other _____	\$ _____
Other _____	\$ _____
Totals	\$ _____

Total \_\_\_\_\_ Deposit Paid \_\_\_\_\_ Date \_\_\_\_\_

Balance Due \_\_\_\_\_ Balance Due on or Before \_\_\_\_\_

Make Checks Payable To: \_\_\_\_\_

## Cancellation Policies & Notes

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