



# 2017 SPECIAL EVENT AGREEMENT

12.27.17

EVENT NAME: \_\_\_\_\_

EVENT DATE: Day: \_\_\_\_\_ Date: \_\_\_\_\_

EVENT TIME: \_\_\_\_\_ MENU SERVICE TIME: \_\_\_\_\_

MAXIMUM # OF GUESTS: \_\_\_\_\_ Adults \_\_\_\_\_ Kids (5-12) \_\_\_\_\_ Infant (0-4)

This should be the maximum amount of guests expected for your event. Final guest count must not exceed this number, as space is reserved based on this amount only. Final guest count is due seven (7) business days prior to event date.

HOST/CONTACT PERSON: \_\_\_\_\_

MOBILE NUMBER: (\_\_\_\_\_) \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

## CREDIT CARD INFORMATION TO HOLD RESERVATION

Credit card information will be held on file to secure the reservation. No charges will be made to the card prior to the event. In the event of a no-show or cancellation that is not done 15 business days prior to the event date, a fee of \$500.00 will be assessed and charged to the credit card. Signature of this agreement give Side Street Inn consent to charge \$500.00 if cancellation is not done according to our policies stated on the 2017 Special Event Information and Policies.

NAME ON CARD: \_\_\_\_\_

TYPE OF CARD: \_\_\_\_\_ MC \_\_\_\_\_ VISA \_\_\_\_\_ AMEX \_\_\_\_\_ DISCOVER

CARD NUMBER: \_\_\_\_\_

EXPIRATION: \_\_\_\_\_ CVV: \_\_\_\_\_

BILLING ADDRESS: \_\_\_\_\_

I HAVE READ AND UNDERSTAND SIDE STREET INN'S EVENT INFORMATION AND POLICIES. I AGREE TO THE TERMS AND UNDERSTAND THAT MY EVENT IS CONFIRMED ONLY WHEN THIS AGREEMENT IS SIGNED BY A SIDE STREET INN REPRESENTATIVE.

\_\_\_\_\_  
EVENT HOST - PRINT NAME      SIGNATURE      DATE

EVENT CONFIRMATION BY SIDE STREET INN REPRESENTATIVE:

\_\_\_\_\_  
SIDE STREET INN      SIGNATURE      DATE