

# CHRISTMAS MENU BOOKING FORM

Please tick the appropriate box and use Capital Letters

Date requested: \_\_\_\_\_ Evening  Lunch

Time: \_\_\_\_\_

Contact name: \_\_\_\_\_

Company/Group: \_\_\_\_\_

Telephone: \_\_\_\_\_

Email: \_\_\_\_\_

Number of diners: \_\_\_\_\_

A desposit of £5.00 for lunchtime and £10.00 for evenings, per diner, is to be paid on booking of your meal.

Deposit paid: \_\_\_\_\_ Date: \_\_\_\_\_

Additional comments or special dietary requirements:

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# CHRISTMAS PARTY PRE-ORDER FORM

Can you please complete pre-order food choices one week prior to your booking

	GUEST NAME	STARTERS	MAINS	AFTERS
1				
2				
3				
4				
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17				
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*Gannets*  
DAYCAFÉ