



**EVENT PLANNING ORDER** v 07/08

Phone: (513) 825-7555 Fax: (513) 825-7527

Name: \_\_\_\_\_ Phone No: ( ) \_\_\_\_\_  
 Company (if applicable) \_\_\_\_\_ Fax No: ( ) \_\_\_\_\_  
 Address: \_\_\_\_\_ Suite/Apt. # \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**DATE:**  OCCASION (i.e. Party, Wedding, Open House, etc.) \_\_\_\_\_  
 Guests expected? # ADULTS \_\_\_\_\_ # Under 21 \_\_\_\_\_ Bar Serving Time: From \_\_\_\_\_ : \_\_\_\_\_ AM PM Until \_\_\_\_\_ : \_\_\_\_\_ AM PM  
 EVENT LOCATION: (If different than above) \_\_\_\_\_ Contact Person \_\_\_\_\_  
 Address \_\_\_\_\_ Zip Code \_\_\_\_\_ County \_\_\_\_\_ Phone ( ) \_\_\_\_\_

**BAR PACKAGE SELECTIONS:**

- TOP SHELF SERVICE
- PREMIUM
- SELECT
- BASIC
- LIMITED
- ECONOMY BAR
- \*CASH BAR \*Available only to Non-Profit Organizations
- "VIP SETUPS" UPGRADE – For a distinguishable difference in taste and elegance
- COFFEE / TEA SERVICE
- CHAMPAGNE TOAST... serving # guests: \_\_\_\_\_  NON-ALCOHOLIC CHAMPAGNE  
*Your preferred Brand/Type? \_\_\_\_\_*
- SPECIAL REQUESTS (i.e., substitutions, special liquors, signature drink, etc.) \_\_\_\_\_
- TAX EXEMPTION ID: \_\_\_\_\_

*\* Note: Your Non-Profit/Charitable organization is responsible for obtaining a Temporary Liquor License. State of Ohio Applications and filing fees must be filed 20 days before the date of the event. For more information, please go to the Ohio Dept. of Commerce, Division of Liquor Center's website [www.com.state.oh.us](http://www.com.state.oh.us) or call 1-800-750-0750 for more information.*

**SETUPS & RENTALS:** Please use the backside of this form to indicate where the bar should be setup, in addition to answering the following questions about your event to aid us in the coordination and smooth execution of your event. Thank you.

- Where will we be serving?  INDOORS  OUTDOORS *Are we providing ... ?*  BANQUET TABLE & SKIRTING  
 2 OR MORE SERVING STATIONS  LARGE Oak BAR  
 OTHER \_\_\_\_\_  Mirrored BACK BAR
- Other equipment:  GLASSWARE:  FROZEN \*DRINK MACHINE...  
 \*Select any 2-Flavors  PINA' COLADA MIX  MARGARITA MIX  STRAWBERRY DAIQUIRI MIX
- LABOR:**  BARTENDER(S) # \_\_\_\_\_  SUPPORT STAFF (Cocktail servers) # \_\_\_\_\_  SOMMELIER'S SERVICES  
 Servers' Attire...  WEDDING FORMAL (Black & White)  CONTEMPORARY  BUSINESS CASUAL  THEMED \_\_\_\_\_

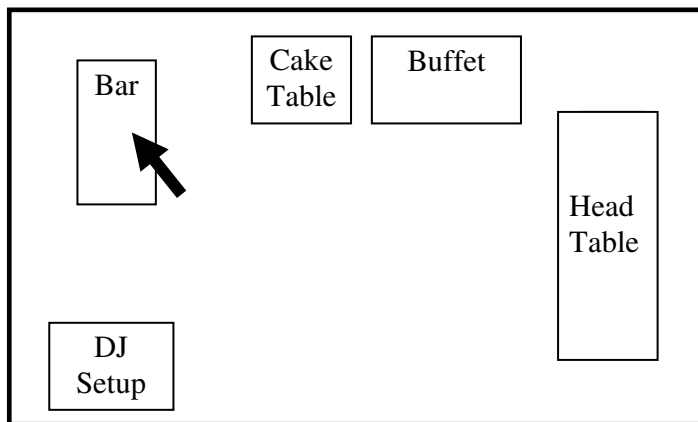
**TO RETAIN OUR SERVICES,** please **COMPLETE THIS FORM** and **MAIL OR FAX** to: 1726 LOCKBOURNE DR., CINTI., OH 45240-3424 FAX (513) 825-7527  
**Please remit a BOOKING DEPOSIT in the amount of \$100.00** (Check or Money Order payable to Bars On Wheels). Partial payment FIFTY PERCENT (50%) OF THE ESTIMATED TOTAL shall be due approx. TWO (2) WEEKS prior to the scheduled event. FINAL HEADCOUNT(S) and/or ANY MODIFICATIONS TO THE ORIGINAL EVENT PLANNING ORDER must be determined no later than TWO (2) DAYS before the date of your event, and the **REMAINING BALANCE DUE UPON SERVICES RENDERED**, unless otherwise agreed to by Bars On Wheels. \*\*\* We're sorry, but we do not accept Credit Card payments at this time. \*\*\*

\*\*\*\*\* Booking deposits/partial payments are deducted from the final bill. \*\*\*\*\*

**Please Note:** NO CHANGES OR CANCELLATIONS WILL BE ACCEPTED LESS THAN FORTY-EIGHT (48) HOURS BEFORE ANY SCHEDULED EVENT UNLESS AGREED TO BY BARS ON WHEELS. Booking Deposits are non-refundable for cancellations made within ten (10) days of the scheduled event.

*Where would you like the bar set-up?*

*Example ...*



*Additional Comments / Special Requests:* \_\_\_\_\_

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