

Food & Beverage Form

Please submit the completed form to the VMBS Scheduling & Events email at vmbs-scheduling@tamu.edu at least two weeks prior to the event. This form must be completed, and all on-site caterers must be approved by the VMBS.

Contact Name:	Email:
Work Phone:	Cell Phone:
Organization/Dept. Name:	
Event Name:	Estimated Attendance:
Event Dates(s):	
Event Location(s):	
Event Start Time:	Event End Time:
Serve Start Time:	Serve End Time:
Name of Caterer:	
Menu (food and beverage):	
Level of Service:	
Box Lunch Self-Serve Buffet – Compostable Buffet – China Plated Meal	
Type of Service:	
Pick-up by Group Drop-off Delivery Additional Information:	Caterer Present
*If day-of/on-site contact is different, please include contact information here. FOR VMBS DEAN'S OFFICE USE ONLY	
Date Received: Set-Up Type:	
Date neceived.	зес-ор туре.
Approved: Yes No	Date:
VMBS Approval Signature:	