

Highlands Food Service Department Request Form

Are you requesting Catering or equipment usage (complete left column for catering, right column for equipment)

Catering	Equipment
Organization:	Organization:
Contact information of person requesting catering event (name and email):	Contact information of person requesting equipment usage (name and email):
Event Title:	Event Title:
Contact responsible for payment of event:	Location of event set up:
Number of people for event:	Time and date of event:
Total Budget Amount: Building of event set up: HECC HES	Equipment request for usage (please check all that apply)
☐ MS ☐ HS	☐ Ice ☐ Drink Bins/Beverage Containers
Community Center Location of event (room number, library etc.)	Pots/Pans Grill
Time and date of event:	Equipment that is in need but may not be listed:
Do you need the following (please check if YES)	
Table covers Décor Divining Décor Divining Décor Divining Decor Divining Decor Decor Divining Decor De	

Please email completed form to swaffensmith@goldenrams.com