

# Private Party Agreement



Please note: Your event is not confirmed until we receive the deposit and this form is signed and completed. You may use the Print Form button to print a completed version of this form and then sign and fax to us at **888-510-4810**. Signed agreements may also be emailed to **info@johnjjeffries.com**.

**John J Jeffries**  
**300 Harrisburg Avenue**  
**Lancaster, Pennsylvania**  
**17603**  
**Phone: 717-431-3307**  
**Sales: 717-431-3309**  
**Fax: 888-510-4810**  
**www.johnjjeffries.com**

E-Mail ladan@johnjjeffries.com to confirm that agreement has been received.

## Host Information

|              |  |
|--------------|--|
| Event Name:  |  |
| Company:     |  |
| Address:     |  |
| City, State: |  |
| Zip Code:    |  |
| Host's name: |  |
| Phone:       |  |
| Email:       |  |
| Fax:         |  |

I have read and agree to follow all of the John J Jeffries Private Dining Guide terms and conditions.

My signature below will act as my acknowledgement of all of the conditions, as well as authorization to charge any cancellation fees to the below credit card.

## Method of Payment:

☐ I have a Direct Bill

☐ Credit Card:

☐ Amex ☐ MC ☐ VISA ☐ Discover

Credit Card Number:

\_\_\_\_\_

Exp Date: \_\_\_\_\_ Security Code: \_\_\_\_\_

Card Holder Name:

\_\_\_\_\_

☐ Please automatically charge the remaining balance to this card at the end of the event.

☐ Please see Onsite Contact, to collect payment at the end of the event. The name of this contact is: \_\_\_\_\_

Signature:

\_\_\_\_\_

## Event Information

|                        |                                            |
|------------------------|--------------------------------------------|
| Day / Date of Event:   |                                            |
| Start Time:            |                                            |
| Est. Number of People: |                                            |
| Room Reserved:         |                                            |
| Room Rental Fee:       | \$200 for Gallery or<br>Blanche Nevin Room |
| Menu Price Selection:  |                                            |
| Beverage Selection:    |                                            |

Special Needs:

|  |
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|  |
|--|

The final guaranteed number of guests is due (5) five business days prior to the start of your event. Should the final guarantee not be received (5) five working days prior to the above function(s), the above expected number of guests will be the basis for the billing charges. To confirm these arrangements on a definite basis, please carefully review and sign each Banquet Event Order then return to your catering representative. If cancellation of this agreement is inside of 30 days of the contracted event dates the restaurant will charge a transferable deposit fee of \$100. If cancellation of this agreement is less than 5 days of agreed date, the lowest priced menu item will be charged per anticipated attendee, as well as any room rental fee. The restaurant reserves the right to relocate your function(s) to another room. Food and Beverage prices are subject to a **20% Service Charge and 6% Sales Tax** will be added to charges outlined above. Events are subject to a service charge of the greater of either 20% total food and beverage or \$100 per server (dinner).