## WRPS Catering Service Request

Date Needed:		Number of Guests:			
Time Need	ded:				
Location/F	Room:				
Requested By:		Date Submit	ted:		
Email Add	ress:				
	-	m to <u>catering@wrps.net</u> . All orde firmation, please call Emiley Ru	=		
Quantity	Description of Food a	nd/or Supply Item	Unit Price	Total	
Special Ins	structions:				
Following payment r	•	will be sent with the total baland	ce due. Please ii	ndicate your	
□ Check		Account Number:			