## **PRIVATE DINING AGREEMENT**

Name:	·		
email A	Address		
City, S	State, Zip		
Phone_			
Date of	f Function Time	Number of Guests	
Occasi	ion		
	greement made by and between Dudley's (customer nam(date of function)		
To gua	arantee the arrangement above:		
1.	A non-refundable deposit of \$100.00 per room is required when the agreement is signed. Deposit amount will be applied to the final bill on the day of the event.		
2.	Payment of all goods and services are due on the day of the event.		
3.			
4.	88888		
	Minimum does not include 6% tax, grat	uity and a 3% service fee.	

- 5. An un-met minimum fee will apply if the food and beverage spending minimum is not met.
- 6. Cancelations that occur within 5 days of the event will result in a fee in the amount equal to half of the spending minimum.

Signed	Date

Remarks: Please sign and return copy with deposit: Dudley's on Short 259 West Short Street Lexington, KY 40507 Make checks payable to "Dudley's on Short"

Credit Card # \_\_\_\_\_ Exp. \_\_\_\_