EVENT FAX ORDER FORM

FAX COMPLETED FORM TO:
byDavid NYC: 212.722.8706

STAFFING & EVENTS
byDavid

Event Date: MM / DD / YYYY
Please use separate forms for each event

1) Billing (company or client): _____
contact: _____
address: _____
city, state, zip: _____

2) Telephone: ( ) _____ fax: ( ) _____ email: _____

3) Credit Card No: _____ Card Exp: MM/YY
(NOTE: Please do not place a credit card # until a planner speaks with you)

4) Would you like to open and account with byDavid?: **Y/N**
(No charge to open up an account)

5) Event Name and Location: _____
Address: _____
City, State, Zip: _____
Staff Parking Information: _____
Directions: _____

6) Level of service (please check the options that will apply)
Event size: ☐ **Small** (150 or less) ☐ **Medium** (150-500) ☐ **Large** (over 500)

☐ Casual Buffet ☐ Semi-formal ☐ Table Service ☐ Very Formal ☐ Passing
☐ Russian ☐ French ☐ Set-up/Breakdown ☐ Food Stations ☐ Other

special comments: _____

7) Number of staff needed, description & arrival times: _____

(We can determine that with you)

8) Approx. shift ending times: _____

9) Attire: ☐ Standard Black & Whites ☐ Bistro: ☐ Other: _____

10) On-site contact: _____ Telephone: ( ) _____

11) Additional information: _____