

Staff rates are calculated hourly at a minimum of four hours per employee. Charges for statutory holidays are set in accordance with Ontario Labour Policy. Please note a minimum of 2 business days cancellation notice must be provided or a 4hr per staff surcharge will apply. Estimate may be subject to a Travel Allowance Fee depending on the event location. Thank you and have an eventful day!

	G	LIENT INFORMAT	ION			
Client Name:		Phone Nu	mber:			
Email:						
Bill to: (Full Name)						
Billing Address:						
City:		Province	::	Postal Code:		
Order Date (MM/DD/YEAR	()	Ordered	by:			
Event Date (MM/DD/YEA	R)	PO#				
Type of Event:	☐ Wedding ☐ So	□ Wedding □ Social □ Corporate □ Festival □ Other				
Type of Service:	□ Cocktail □ Bu	ffet 🗆 Sit-down	Numbe	er of guests:		
Event Location:						
Event Address:						
City:		Province	::	Postal Code:		
Major Intersection:						
Event Contact Name:		Phone N	umber			
Guest arrival time:		Estimate	ed end time:			
Event Special Notes:						
STAFF REQUEST						
Staff Postion	Number of Staff	Start Time	Estimat	ed End Time	Estimated Hours	
Select Position						
Select Position						
Select Position						
Select Position						
Select Position						
Select Position						
Select Position						
Select Position						
Select Position						
		UNIFORM				
Black Bistro	White Bistro	All Black	S	ummer	Special Requests	
Black shirt, black vest black tie and black shoes	White shirt, black vest black tie and black shoes	Black shirt, black pants, and black shoes	polo, b	e or black black pants lack shoes		