The Zoo Sports Club – Catering & Events Questionnaire

Event Contact Information

Full Name:

Phone Number:

Email Address:

Preferred Contact Method: ☐ Phone ☐ Email

Event Details

Event Type: ☐ Birthday ☐ Anniversary ☐ Graduation ☐ Corporate/Busine ☐ Fundraiser ☐

Event Date(s):

Event Time (Start–End):

Estimated Number of Guests (max 50):

Will your event require Chandos (Private Bar/Room)? ☐ Yes ☐ No

Food & Beverage

Preferred Service Style: ☐ Buffet ☐ Plated Meal ☐ Passed Appetize ☐ Food Stations ☐ Other

Meal Type: ☐ Lunch ☐ Dinner ☐ Cocktail/Light Bites

Appetizer Preferences:

Entrée Preferences:

Side Dish Preferences:

Dessert Preferences:

Bringing Own Desserts? ☐ Yes ☐ No

Bar Needs: ☐ Cash Bar ☐ Open Bar ☐ Drink Tickets ☐ Specialty Cocktails

Any Dietary Restrictions or Allergies?

Special Requests

Theme or Décor:

Entertainment/Music Needs:

Will you bring in outside vendors?

Additional Notes:

Budget & Next Steps

Estimated Budget Range: