



The Carlson Towers Rotunda
601/701 Carlson Parkway
Minnetonka, Minnesota

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BON APPÉTIT
MANAGEMENT COMPANY

food services for a sustainable future®

This Information Must Be Completed To Book Your Event

Main Contact (s): _____

Company Name: _____

Current Address: _____

Office Telephone: _____

Cell Telephone: _____

Fax Telephone: _____

E-mail Address (clearly): _____

Day and Date of Event: _____

Type of Event: _____ Ceremony? yes ___ no___ Estimated Number of Guests: _____

Times of Event: _____

Please tell us how you heard about us?

If Internet, which Website? _____

Room Charge: \$ _____

Food & Beverage Minimum: \$ _____

**I have read and fully understand the policies and procedures of
Bon Appétit Food Management Company and The Carlson Center
as stated within the Carlson Center website at www.carlsoncenterevents.com.**

**I agree to these policies and allow that they serve as the contract for my event.
I understand that non-compliance with these policies may result in
extra fees that will be charged to my account.**

**I agree to pay such charges immediately upon receipt of the invoice(s).
I understand that all prices are subject to change, excluding the room charge and food
and beverage minimum purchase.**

Responsible Party Name (please print) _____

Signature: _____ Date: _____

Corresponds with the policies written on www.carlsoncenterevents.com

If paying by check, please write check to Bon Appétit; credit card information must be called in, or charged on-site