

Dollies Tea Room & Gift Emporium

EVENT DATE:

DEPOSIT INVOICE

TO: Group Representative Name
Group Name
Email
Phone

Event:			
Event Date:			
Event Time:			
Location: Dollies Tea Room			
Quantity	Description	Unit Price	Total
		(includes tax & gratuity)	
TOTAL			
Deposit Due			\$ 100.00
TOTAL DUE DAY OF EVENT			

The above estimate is not a guaranteed amount. The Final Invoice will reflect charges according to the final guaranteed guest count and any additional changes incurred as approved by Client and Amy Myers/Terri Firestein. To ensure booking of this event, please read and sign this Deposit Invoice. Please mail a copy along with your deposit (check made out to Dollies Tea Room) to *Dollies Tea Room – PO Box 5, Clear Spring, MD 21722*. By paying your deposit you are agreeing in full to our **Tea Room Policies** as posted on our website, www.dolliestearoom.com.

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Guarantees on Number of Guests:

Food, beverage and add-on items charges based on guest count will be based on the Client's final guarantee. Final guest counts are due no later than one week before the date of the event. If no final guest count is received, we will use the number of guests used in the attached proposal. If the guaranteed guest count falls below 75% of the proposal guest count, the price per guest may be increased. We will make every effort to accommodate any last minute increases in the guest count. Menu changes for any reason are not available on the day of the event. "No Shows" on the day of the event will be boxed for you to take with you.

Deposit & Cancellation Policy:

A deposit of \$100.00 is required to confirm the booking of this event. Deposit refunds on cancellations are handled as follows –

- Notice over 30 days prior to event: 50% refund of deposit
- Notice less than 30 days prior to event: no refund of deposit

Final Payment:

The invoice amount is due upon receipt the day of the event.

Upon review and acceptance of the proposal and our catering policies, please sign below and return this document with your deposit.

Name

Date

Credit Card Information: Visa / MasterCard / Discover

Name on Card _____

Card #: _____ Expiration Date: _____

V Code (last 3 digits on signature strip on back of card): _____

I hereby authorize Dollies Tea Room to bill the credit card listed above in the DEPOSIT amount named as payment to hold our event day/time. The deposit amount will be applied to Final Payment. By signing below I also agree to the above mentioned **Deposit and Cancellation Policy** stipulations and the **Tea Room Policies** as found on the website, www.dolliestearoom.com :

Customer Signature

Date