GARÇON S·V·P



PERSONNEL DE SERVICE POUR VOS ÉVÉNEMENTS SPÉCIAUX

Staff Service Request Form

Company name or organization:	
Company's or organization's 's address:	
Person to contact:	
Title:	
E-mail address:	
Telephone/cellulaire number:	
Event type:	
Date of event (yyyy-mm-dd) :	Number of guess'
Event's name/title:	
Event's address (location):	
What time where the event begins?	
What time does the guess' arrives?	
On-site contact:	

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Maître d'hôtel:						
What time doe	s staff staff arriving? $\Big[$					
What time doe	s staff staff finishes?					
What time doe	s the event ends?					
Number of mai	tre d'hôtel or capitain:	Male preference		Female prefere	ence	
Number of wai	ter(es):	Male preference		Female prefere	ence	
Number of bar	man(s)/maid(s):	Male preference		Female prefere	ence	
Other type of s	taff:	Male preference		Female prefere	ence	
Professional attire (for males):						
Professional attire (for females):						
Particular directives and/or additional information:						
Signature:			Date	(yyyy-mm-dd):		