

UDairy Café Catering Request Form

Please submit your request at least 1 week prior to your event; contact for availability if less than 1 week.

Requests can be e-mailed to udairycafe@udel.edu.

Orders can be paid via JV, cash, credit card or checks payable to "*University of Delaware*". For questions email or call the UDairy Cafe at 302-831-6804.

Name:	Organization:		
Phone Number: ()	E	-mail:	
Date of Event://	Time of Event:		
When would you like us to be	finished with set-up:	(am/pm) Estimat	ed attendance:
Please choose one:	Event/Delivery	Location:	
Delivery available on-cam or a \$10 fee will be ap	pus & to STAR Campus. oplied. Pick up available	• •	
If paying via JV please provide a pu Purpose Code:	-	oprover:	
If paying via credit card please	e call (302)831-2486 or (3	802)831-6804 to provi	de card information.
Please list your requested mer	nu and make note of the qu	uantity of each item yo	ou would like to order
Item Name	Quantity/Size	Price Per Unit	Total Price
1			
2			
3			_
4			
5			
6			
7			
9			
10		To	tal Cost:
Office use only: Date request	submitted:A	oproved on:	Confirmed on: