



**SMOKEHOUSE CATERING REQUEST FORM**

320 W. Willoughby Ave. Juneau, AK 99801  
[smokehousecatering@cchita-nsn.gov](mailto:smokehousecatering@cchita-nsn.gov)  
 P: (907) 463-7122 • F: (888) 322-6407

**EVENT DETAILS**

Event Name:	Event Date:
Event Time:	Estimated Count:
Event Location:	
Please Select One: <input type="checkbox"/> Delivery <input type="checkbox"/> Pick-up <input type="checkbox"/> On-Site (for Elizabeth Peratrovich Rentals Only)	

**CONTACT INFORMATION**

Event Contact:	
Company/Institution/Department:	
Phone:	Cellular Phone:
Email:	

**ORDER**

Quantity	Item

**AGREEMENT**

I agree to provide Smokehouse Catering with the final guest counts at least 7 working days prior to the event date. I agree to accept responsibility for the final guest count or the actual guest count, whichever is greater. Request for menu changes must be received at least 7 working days prior to the event. Not all last minute requests can be honored. Please submit request(s) electronically to [smokehousecatering@cchita-nsn.gov](mailto:smokehousecatering@cchita-nsn.gov).

Signature: _____	Date Submitted: _____
------------------	-----------------------

*Thank you, Noel Ramirez, Executive Chef*

