



Private Room Rental Form
SEATING CAPACITY 34PPL

Name _____

Phone Number _____

Date of Event _____

Time of Event _____
(3 Hour Time Limit)

Email Address _____

PAYMENT BY CREDIT CARD:



Card Number _____

Expiration Date _____

Card Security Code ____ (3-digit code on back of VISA/MC or 4 digit code on front of AMEX)

Name as it appears on the card: _____

Exact Billing Address for the card: _____

Cost Summary: Based off \$30.00 Per Person(34 Guest)

\$1020.00 (Food & Beverage \$30.00ppl)

\$204.00 (22% Gratuity)

\$81.60 (Taxes 8%)

\$200 (Room Rental)

\$1505.60

Payment Terms: 50% DUE UPON SIGNING OF CONTRACT Remaining balance due day of Reservation.

Cancellation Policy: A14 day notice is required on all cancellations. Failure to cancel within the 14day period will result in a non-refundable fee \$752.80.

GUIDELINES:

Preset Menu will be arranged with client and management. (No iPad Ordering)

Payment must be made by signer of contract

One Hi Res JPEG logo or picture is allowed for video mapping. (send to info@bytesrestaurant.com)

Customized graphics can be created upon request & budget approval

No outside food/or beverages are allowed **except for Celebratory Cakes** (**Cake Cutting Fee: \$35.00**)

Signature: _____ Date: _____

