



AUTENTICA CUCINA ITALIANA

Private Dining Contract

Event Date & Time: _____

Primary Contact: _____

Contact Phone: _____

Contact Email: _____

Event Name: _____

Approximate Guest Count: _____ [Adult _____ Children _____] Gluten-Free/Vegan: ☐ Yes, _____ ☐ No

Alcohol Service: ☐ Open bar ☐ Cash bar

Separate Checks (2% split fee, we don't allow separate checks for more than 20 guests): ☐ Yes ☐ No

Menu Option: ☐ #1 ☐ #2 ☐ #3 ☐ #4 ☐ #5 ☐ #6 ☐ #7 ☐ #8

Menu Choices (Fresh Baked Bread, House Mista Salad, Profiterol al Cioccolato, Soda, Unsweet Tea and Water Included):

_____, _____
_____, _____
_____, _____

Children Menu Choices:

_____, _____

Add On Options:

☐ Antipasto Plate - \$9/pp ☐ Bruschetta - \$8/pp ☐ Buratta - \$11/pp ☐ Caprese - \$8/pp

Different Salad Choice:

Different Dessert Choice:

☐ Cesare - \$8/pp ☐ Primavera - \$9/pp ☐ Tiramisu - \$6/pp

Notes: _____

☐ I read and agree to the contract terms and have relayed the required information to my guests.

Signature

Date

Restaurant Use Only

Deposit Amount: _____ Date Deposit Paid: _____

Payment due on the day of the event, 8.25% tax, 20% gratuity and if applicable a 2% split check service charge will be added on to the Final per Person Price. If all of your guests don't show you are required to pay for those meals. By signing this contract, you agree to the above terms and conditions listed on the previous pages by signing this contract, you are giving permission for La Bella Vita Ristorante, as stated in the cancellation section, to charge any cancellation fee to the credit card provided. **Guests must remain in your assigned room and may not go to the bar for drink orders. If your guests are disruptive or disrespectful to our staff we have the right to refuse service and ask them to depart your event.**