CAFE
ONE TWO NINE

# PRE-ORDER FORM

BOOKING DATE: BOOKING NAME:

NO. OF GUESTS: TIME OF ARRIVAL: TIME FOR MEALS TO BE SERVED:

PHONE: EMAIL:

**TO ENSURE YOUR GROUP IS CATERED FOR IN THE MOST EFFICIENT MANNER, PLEASE EMAIL THIS COMPLETED FORM TO INFO@STRATH.COM.AU BY 10AM ON THE DAY OF YOUR BOOKING.**

**129 NORTH TCE, ADL SA | 08 8238 2900 | INFO@STRATH.COM.AU**

Please note we will always do our best to serve meals at the requested time but no guarantees can be given.

Please note the hotel takes no responsibility for guests who arrive after the requested time for meals to be served. Please write clearly and legibly.

**PLEASE NOTE: THE HOTEL MUST BE NOTIFIED OF ANY CANCELLATIONS OF ANY ORDERS 30 MINS PRIOR TO BOOKING TIME. FAILURE TO NOTIFY WILL RESULT IN HOST BEING RESPONSIBLE FOR PAYMENT OF MEALS. ALL PRE-ORDERS MUST BE FAXED OR EMAILED TO THE HOTEL.**

| NAME | ENTREE | MAIN COURSE | HOW COOKED<br>EG RARE/MED/WELL<br>EXCLUDES STONEGRILL | SIDE ORDERS<br>EXTRA CHARGE IS APPLICABLE | DESSERT | PRICE OF MEAL |
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## PRE-ORDER FORM CONTINUED

## NAME OF BOOKING:

| NAME | ENTREE | MAIN COURSE | HOW COOKED<br>EG RARE/MED/WELL<br>EXCLUDES STONEGRILL | SIDE ORDERS<br>EXTRA CHARGE IS APPLICABLE | DESSERT | PRICE OF MEAL |
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