

Red Zone Meal Request Form

Event Date : May 25 - 27, 2018

Contact Person _____
Club/Church _____

Email _____
Cell Phone _____

| MEALS | ADULTS (8yrs & older) | | | CHILDREN (4-7yrs old) | | |
|-------------------|------------------------|---------|----------|-----------------------|--------|----------|
| | Quantity | Price | Subtotal | Quantity | Price | Subtotal |
| Friday Supper | | \$10.75 | | | \$9.75 | |
| Sabbath Breakfast | | \$10.75 | | | \$9.75 | |
| Sabbath Lunch | | \$10.75 | | | \$9.75 | |
| Sabbath Supper | | \$10.75 | | | \$9.75 | |
| Sunday Breakfast | | \$10.75 | | | \$9.75 | |
| Sunday Lunch | | \$10.75 | | | \$9.75 | |
| TOTAL | | | \$ | | | \$ |

| Summary | Quantity | Amount |
|----------------|----------|--------|
| ADULT MEALS | | |
| CHILDREN MEALS | | |
| TOTALS | | \$ |

CREDIT CARD PAYMENT

Name _____
Address _____
City, State & Zip _____

CC Number _____
Exp Date _____
CVV Code _____

TERMS AND CONDITIONS

- > Meal Tickets are non-refundable and non-transferable (i.e. you can't exchange a Sabbath breakfast for a Sunday breakfast)
- > Meal Counts are guaranteed. Should you need to increase or add meals, please contact us before the event
- > NO PERSONAL CHECKS will be accepted – Only Church Checks, Money Orders or Credit Cards (Visa, MasterCard and Discover)
- > All forms must be submitted via fax or mailed. You can also request meals over the phone with a Credit Card payment

Signature: _____

Today's Date: _____



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