

Restaurant Participation Confirmation

READ, FILL OUT COMPLETELY, SIGN AND FAX or EMAIL to LMcPherson@WilcoxManor.com and peter@cfatustin.com.

I have read and understand the terms on these pages.

Name of Restaurant:

Name of Contact:

Signature: _____ Date: _____

Need Electricity? Yes No

Mailing Address:

Phone: _____ Email: _____

On-Site Manager for Event and Cell Number (10/27/19):

Planned time of arrival:

Food and/or Drink Being Served and Paper Products Requested:

If you have any questions, please do not hesitate to contact us.

Lindburgh McPherson lmcpherson@wilcoxmanor.com

(626) 422-5820