

DEPOSIT CONTRACT

I agree to the terms and conditions of the Signature Events Deposit Contract contained within the Signature Events Packet.

Group Name

Date of Function

Number of Guests

Arrival Time

Departure Time

Type of Function:

During the actual event, who will be the contact person if we have questions?

Name

Cell Phone

Room Reservation Deposit \$1000 SHERIDAN ROOM

\$500 SHERIDAN ROOM

\$500 SHERIDAN ROOM

*If you use a credit card, we will charge an additional 3% to help offset processing costs, this amount is not more than what we pay in fees. We do not surcharge debit cards.

Check your method of payment:

Cash Master Card VISA American Express Check /Check Number

I authorize Lightfoot to charge the following amount to my credit card \$

Name of Card Holder as it appears on your Credit Card

Card Number

Expiration Date

3 or 4 digit code

Address

Street

City

State

Zip Code

*

Phone #

Fax #

Cell #

E-Mail Address

By a Duly Authorized Agent of

I agree to all the terms and conditions in the Signature Events Packet; including cancellation fees and event payments.

Due to the historic nature of our property, the Greene and Marshall Rooms are only accessible by stairs.

Signature

Please Print Name

Date

The completed form may be emailed to Carrie@LightfootRestaurant.com

