

CATERING REQUEST WAIVER FORM

Food Waiver Guidelines

Completed form and all accompanying documents must be received by Dining Services Catering at least **fifteen (15) business days prior** to the date of the event. The form and all requested documents **not** received within this window are automatically denied. Email: catering@wright.edu

The following documents must be submitted with the above form: 1) a copy of caterer's/vendor's food license; 2) a copy of caterer's/vendor's certificate of insurance in the amount of \$1 million listing Wright State University as an additional insured.

All menu items and their corresponding prices must be included on this form.

Submission of this form does not constitute a room reservation.

All room reservations must be confirmed with the Student Union Administration Office (775-5512) prior to submission.

Date of Application	Date of Event
Contact Name	Email
Contact Number	Fax
Department/Organization	FOAPAL:

Event Location	Start Time
Guest Count and Affiliation	End Time

Description of Event

Reason for Request

Open to Public Yes No Fee to Attend Yes No Amount _____

Menu Information (include additional sheet if needed)				
Item Name	Quantity	Cost	Purchased/Donated	Received From

Food Waiver Agreement

I agree that only the above listed menu items will be offered at this event.

I understand that Wright State University and/or the University Food Service Partner(s) will not be held liable for any illness or casualty resulting from this food.

I will comply with Wright Way Polices & Procedures regarding food handling, food safety, sanitation, prepararion, and storage.

I understand that it is my organization's responsibility to maintain the cleanliness of the meeting area including the removal of food, utensils, and trash as well as returning the room to its original state.

I have read and agree to abide by the Food Waiver guidelines and agreement (initials)
(All checkboxes must be selected)

The section below is for Dining Services use only!

Approve Denied