

## MARINA CITY CLUB

Banquet/Catering Department  
4333 Admiralty Way  
Marina del Rey, CA 90292  
Phone: (310) 578.4906



Event Date: _____	Min. Guests: _____	Max Guests: _____	Start Time: _____	End Time: _____
Type of Event: _____		Responsible Party (Host): _____		
Home Phone: _____	Cell: _____	Fax: _____		
Street Address: _____				
City: _____	State: _____		Zip: _____	
Email: _____ @ _____ . _____				
Summary of Menu Selections: _____			Served or Buffet (Circle One)	
Summary of Bar Selections: _____			Hosted or Cash (Circle One)	
Accepted Signature: _____		Print Name: _____	Date: _____	

### PAYMENT

for deposit, payment, fee,  
and/or charge for any overage  
or damage that occurs before  
or after the event.

I authorize Marina City Club to charge my credit card: \$ \_\_\_\_\_

Credit Card # \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Name as it Appears on Card: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### PAYMENT SCHEDULE

Deposit #1 \_\_\_\_\_ /\$ \_\_\_\_\_ (Date/Amount) \$2500 (All are Non-Refundable, Non-Transferable)

Deposit #2 \_\_\_\_\_ /\$ \_\_\_\_\_ (Date/Amount) 50% of Final Balance, Due 90 Days Prior to the Event

Final Estimated Payment \$ \_\_\_\_\_ Date: \_\_\_\_\_ Due 7 Days Prior to Event (Cashiers Check, Visa, or AMEX)

**Deposits** are based on estimates only. The **FINAL PAYMENT INVOICE** details charges based on final count and any changes to the banquet event order and is approved by Management.