



Panther Valley Golf & Country Club
 One Forest Drive
 Allamuchy, NJ 07820
 Phone: 908-850-0800
 Fax: 908-850-4828
 www.panthervalleygolf.com
 info@panthervalleygolf.com

Name:			
Address:			
Home Phone:	Business Phone:	Surprise - Yes / No	Time Guest Arrives:
Cell Phone:	Fax:	If Surprise, Contact Name & Phone:	
E-Mail:		Date:	
Function:		Time:	

Only the room(s) circled below will be provided to your party:
 Grand Ballroom Upper Terrace Lower Terrace Members Grill Upper Mixed Grill Lower Mixed Grill Main Bar Lobby

Room(s) Will Be Available One Hour Prior To Function For Decoration. Room Rental:

Price:	No. Expected:	No. Guaranteed (at full price):	Deposit:	Check #:	2nd Deposit:	Check #:
--------	---------------	---------------------------------	----------	----------	--------------	----------

All Prices Subject to Applicable Sales Tax & 20% Service Charge
 Wine & Beer - Yes / No \$ _____ Open Bar - Yes / No \$ _____ Tab Bar - Yes / No Cash Bar - Yes / No Bar Set Up Fee - \$ _____

Meals for Children 4-10: 1/2 Price
 Meals for Children 3 & Under: Complimentary
 Meals for Vendors: 1/2 Price

Final Payment Must Be Received No Later Than 5 Days Prior To Event By Cash or Certified Check. No Credit Cards Accepted.

Assigned Seating or Open Seating
Seating Chart - Yes / No
 _____ Tables of _____

Continental Breakfast

Breakfast Buffet
 Seasonal Fresh Fruit
 Hard Boiled Eggs
 Fresh Baked Muffins * Danish * Bagels
 Cream Cheese * Butter * Jelly

Beverages
 Freshly Brewed Coffee * Decaf * Tea
 Orange Juice

Proper Country Club Attire Is Required By All Guests.

Special Instructions:

By signing below, lessee acknowledges that it has read and that it understands all terms as outlined on both sides of this agreement. Lessee acknowledges that it has had the opportunity to have this agreement reviewed by an advisor of its choice, including an attorney. Lessee likewise acknowledges that it has voluntarily entered into this agreement. Please sign contract and return within five(5) days. Please retain one(1) copy for your records. All pages must be returned together.

Agreed By:	Date:	Accepted By PVGCC Representative:	Date:
Print Name:	Date:	Approved By PVGCC Representative:	Date: