



**AGREEMENT
TERMS & CONDITIONS**

Please indicate your understanding and acceptance of these Terms and Conditions, as well as the total catering costs and menu provided herein by signing below. By providing such signature, Client agrees to pay all charges contained in this Catering Agreement to Compass Group in accordance with the terms stated above. Client also represents and warrants that the person signing this agreement on behalf of Client has been authorized to do so by Client. Please retain a signed copy of the Agreement for your records.

Payment Information
(To be completed by "Client")

BILL TO: _____

PCARD/CC#: _____

EXP DATE: _____

CVV _____

BILLING ADDRESS: _____
street, city, state, zip

PRINTED NAME: _____

SIGNATURE: _____

DATE: _____

Agreed to and Signed By "Client":

Signature: _____

Printed Name: _____

Date: _____

INITIAL: _____