

CROATIAN CATHOLIC CENTRE
798-808 Springvale Road, Braeside Vic. 3196
Tel: 9769-1966 / Mob: 0408 699 550 / Fax: 9798-7825

CONTRACT FOR RECEPTION MENU

Name: _____ Phone: _____ Mob: _____

Date of function: _____ / _____ / _____

Menu:

Antipasto platters: – Prosciutto, salami, ham, cheese, olives.

Soup: Choice of one soup

1. Homemade Chicken soup
2. Mushroom soup
3. Minestrone soup
4. Pumpkin soup
5. Beef soup with homemade noodles

Entrée: Traditional Croatian Cabbage Rolls (Sarma)

OR

Choice of two entrees: (alternate serve)

1. Crumbed fillet of fish with greens and tartare sauce
2. Penne pasta (carbonara or vegetarian)
3. Seafood risotto with parmesan cheese
4. Chicken vol au vents with salsa sauce

Main course:

Choice of 2 meals (alternate serve - only applies to choices 2 to 5).

1. Mixed platter –Roast pork neck, chicken schnitzel, roast beef, grilled chicken drumstick
2. Grilled fish fillet (blue Grenadier or Trevally fillet)
3. Crumbed chicken breast
4. Roast leg of lamb (rolled) served with gravy or mint sauce
5. Roast pork neck – served with gravy

All mains are served with roasted potatoes and fresh garden salad per table.

Bread rolls and butter are served.

Dessert:

Fresh fruit platters per table and coffee and tea

Vegetarian or gluten free options are available upon request.

Drinks: - Beer, Wine, Champagne, Juices, Coke, Soda Water, and mineral water

Other _____

Guests arrive at the hall at _____ pm.

Hall is available until 1am after which an extra fee of \$_____ per hour applies.

The bar is open until midnight (12.00am). It is illegal to serve alcohol to persons under 18 years.

- The organisers are responsible for:
- Spirits
 - Wedding cake
 - Cakes and desserts

Main table – No. of places _____

Number of guests: _____ Adults: _____ Children 6-12: _____ Children under 6: _____

Hall Decoration Centre _____ Organisers _____

Flowers Centre _____ Organisers _____

Arch: Yes / No Centre _____ Organisers _____

Table cloths Centre _____ Organisers _____

Organisers must inform the centre of final numbers 14 days prior to commencement of function. The final numbers notified will be the numbers charged for unless numbers increase.

Cost per person: Adult- \$ _____
 Children 6 to 12 years - \$ _____
 Children under 6 – free

Signature: _____
Organiser

Date: ____/____/____

Signature: _____
Centre Representative

Date: ____/____/____