

# MAGUIRES BAYFRONT RESTAURANT

1 BAYWALK PO BOX 647 OCEAN BEACH NY 11770  
PHONE (631)583-8800 FAX (631)583-7974

## CONTRACT AGREEMENT

DATE \_\_\_\_\_

GROUP NAME \_\_\_\_\_

CONTACT \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE NUMBER HOME \_\_\_\_\_ WORK \_\_\_\_\_

FAX NUMBER \_\_\_\_\_

FUNCTION \_\_\_\_\_

LOCATION OF FUNCTION \_\_\_\_\_

DAY/DATE \_\_\_\_\_

START TIME \_\_\_\_\_ FINISH TIME \_\_\_\_\_

NUMBER OF PEOPLE \_\_\_\_\_

DEPOSIT (\$1000.00 NON-REFUNDABLE) \_\_\_\_\_

AMOUNT DUE \_\_\_\_\_

BALANCE DUE BY \_\_\_\_\_ TO HOLD THIS DATE, OTHERWISE  
CONTRACT NULL AND VOID.

CONFIRMATION: IF THESE ARRANGEMENTS MEET YOUR APPROVAL,  
PLEASE SIGN AND RETURN COPY WITH YOUR DEPOSIT.

SIGNATURE OF APPROVAL \_\_\_\_\_

GUARANTEES: THIS NUMBER OF \_\_\_\_\_ PEOPLE WILL BE  
CONSIDERED THE GUARANTEED NUMBER THAT YOU WILL BE CHARGED  
FOR. WE REQUIRE RSVP FROM WEDDING GUESTS RETURNED THRU THE  
CLIENT.

CANCELLATIONS: MAGUIRES BAYFRONT RESTAURANT WILL ACCEPT  
CANCELLATIONS 30 DAYS PRIOR TO THE EVENT DATE WITH REFUND,  
LESS \$1000.00 NONREFUNDABLE DEPOSIT.