

PRIVATE PARTY AGREEMENT

LET THIS DOCUMENT SERVE AS A CONTRACT BETWEEN THE GREAT SOUTHERN RESTAURANT GROUP AND:

NAME: _____

COMPANY NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: _____ FAX: _____ EMAIL: _____

PRIVATE EVENT DETAILS:

DATE: _____ TYPE OF EVENT: _____

ARRIVAL: _____ GUEST COUNT: _____

A/V REQUEST: _____

FISH HOUSE PRIVATE PARTY GUARANTEE:

The minimum spend required to reserve the BAIT SHOP, SUSHI ROOM or PILOT HOUSE for a private event is \$1000*. The amount includes food and beverage purchases. In addition, 7.5% sales tax and 22% gratuity will be added to the final bill. Should the party not meet the \$1000 food and beverage minimum, a room charge will be added to meet the \$1000 minimum food and beverage spend.

**Note: The sushi room has a food and beverage minimum of 1500.00 on Friday and Saturday nights*

ATLAS OYSTER HOUSE PRIVATE PARTY GUARANTEE:

The minimum spend required to reserve the CAPTAIN'S ROOM for a private event is \$2500*. The amount includes food and beverage purchases. In addition, 7.5% sales tax and 22% gratuity will be added to the final bill. Should the party not meet the \$2500 food and beverage minimum, a room charge will be added to meet the \$2500 minimum food and beverage spend.

**Note: The Captains room has a 3000.00 food and beverage minimum on Friday and Saturday nights.*

GUEST COUNT:

For final billing and to orchestrate adequate staffing, we do ask for a final guest count 72 hours prior to the event.

CANCELLATION POLICY:

In the event of a cancellation, the Great Southern Restaurant Group will make every attempt to rebook the venue. If rebooked, you will not incur a cancellation fee. If not, it will be necessary to charge a cancellation fee of \$250.

Should you not cancel the event and do not show, it will be necessary to charge the original agreed upon minimum food and beverage spend for your particular venue, plus tax and gratuity.

The signature of the person booking the private party indicates that the person has read and agreed to the terms of this agreements as outlined above. Please fax a signed copy of this agreement to : 850-470-0694

PRINT NAME OF PERSON RESPONSIBLE FOR PAYMENT: _____

SIGNATURE OF PERSON RESPONSIBLE FOR PAYMENT: _____

CREDIT CARD NUMBER/EXPIRATION DATE: _____ exp. _____

For further information or for additional assistance, please feel free to contact our Private Party Coordinator:

Melissa Bailey

Phone: (850) 433-9450

Melissa@goodgrits.com