

BERTOLINI FOOD SERVICE WAIVER

Name of Organization/Department: _____

Daytime Phone: _____ Cell/Bus. Phone: _____ Email Address: _____

Authorized Representative: _____ Title: _____

Purpose of Use (Be Specific): _____

Date of Event: _____ Time of Event: _____

- Food/Concessions

The District's catering firm has exclusive rights to cater any event and to sell concessions. All food must be approved. There is no food allowed in most facilities.

JC Fresh Delights Cafe Representative: _____