| Fresno State Dining Services | |
|--|---|
| Union Snack Bar Pizza Order Form | |
| | (One order per form please) |
| | Debbie Allen Holt 559-278-2025 (office) ~ debbieg@csufresno.edu |
| | |
| Client Name: | |
| Phone Number: | Cell Phone Number: |
| | |
| Date of Order: | Number of Guests: |
| | me: |
| **Please note, order pick up time must be within the Union Snack Bar's hours of operation | |
| Food & Beverage | e Order : (click here to view Union Snack Bar menu): |
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| • Orders to be invoiced must be submitted <i>five (5) business days prior to event date</i> . | |
| All other orders require minimum 24 hours' notice We will do our best to accommodate late requests, additional fees may apply | |
| | <i>t confirmed</i> until you receive a contract or email confirmation from the Union Snack Bar |
| | irtments are extended credit with prior authorization and an invoice will be sent following pick up. For all other |
| | nt, in full, is required when order is picked up |
| | rge if orders are cancelled at least three (3) business days prior to the order date . Should you need to cancel |
| your order less t including food a | than three (3) business days, the Client is responsible for 100% of the cost of goods purchased for the order |
| | ders to Debbie Allen Holt at <u>debbieg@csufresno.edu</u> when completed; only one order per form please |
| | |
| | |
| | |
| Signature | Today's Date: |
| | Today 5 Date |
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