

### Taste Tastings

Client: \_\_\_\_\_ Company: \_\_\_\_\_  
Cell: \_\_\_\_\_ Ph: \_\_\_\_\_ Email: \_\_\_\_\_  
Guest Count: \_\_\_\_\_ Client:  New  Existing • Payment:  CC or  Check • Receipt:  Bring  Mail  Fax  Email  
 Pick Up or  Delivery Address: \_\_\_\_\_ Suite: \_\_\_\_\_  
City: \_\_\_\_\_ Contact: \_\_\_\_\_ Phone: \_\_\_\_\_  
Day: M T W Th F Sat Sun ~ Date: \_\_\_\_\_ 2010 Time Served: \_\_\_\_\_ - \_\_\_\_\_

### Taste Tastings

Gratuity at Clients Discretion \$ \_\_\_\_\_ Taste Rep: \_\_\_\_\_ Driver \_\_\_\_\_  
Minimums apply for Delivery • Delivery Fee & CA tax added\_ • Pick Up: 26I40 Enterprise Way, Lake Forest, CA 92630