

## Liability Waiver for Caterings

I	hereby sign this liability release form on	of 20 I
acknowledge liability and release to	o ", DBA "Sweet Pari	s" from any and all liability of
injuries, loss or damage to persona	l property that may arise in the event of my participation i	n catering activity at
	I agree to comply with all rules and regula	ations set by the managers as
well as safety provisions.		

Customer Signature

Date

Event Staff Signature

Date

www.SweetParis.com



## Please fill out the Credit Card Authorization form and email back to the event staff member you have been in communication with to reserve your event, Merci!

Date of Ex	/ent:	-			
Location:		-			
Credit Card	Information				
Card Type:	□ MasterCard □ Other	□VISA		□ AMEX	
Cardholder I	Name (as shown on car	d):			
Card Numbe	r:		_		
Expiration I	Date (mm/yy):		CVV		
Cardholder ZIP Code (from credit card billing address):					
(Please Print	)				
Ι,	, au	thorize_charge my cre	dit card above for agree	ed upon purchases and/or	

services.

**Customer Signature** 

Date

Minimum 20 guests. Each guest will be entitled to 1 savory & 1 sweet crêpe from the host's curated menu. Ingredients brought based on host selection (i.e. 1/3 for each crêpe selected) and guest count. \$150 non-refundable deposit required to schedule catering event that goes towards required spend of \$500. One chef is required for every 30 guests at \$120. Set up fee of minimum \$45, subject to change depending on party size. Travel fee may apply depending on event location. Credit card required for deposit to reserve event & balance pre-paid before the event on one credit card; we accept all major credit cards. Confirmations and cancellations are made via email.

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