**NAT’S ON MAPLE**

**EVENT CONTRACT**

**On-Site Events Guarantee**

PRIVATE FRONT ROOM DINNER RESERVATIONS

20 – 40 PEOPLE

EMAIL : eventcoordinator.nats@gmail.com

Final guest count is due seven business days before the event.

Gift cards CAN NOT be purchesed towards minimum.

Payment is due the day of event.

THERE IS NO CHARGE IF YOU MEET THE MINIMUM, IF NOT BALANCE IS CHARGED AS A ROOM FEE

AN 18% GRATUITY WILL BE ADDED TO YOUR TOTAL

CUSTOM MENU PRINTED AND PLACED FOR EACH GUEST

CHOOSE 5

ENTREES

GUESTS CHOOSE FROM MENU NIGHT OF EVENT

PLEASE PRE-OREDER APPETIZERS

BAR OPTIONS: OPEN OR LIMITED

ALL BEVERAGES CHARGED ON CONSUMPTION

TUESDAY – SATURDAY DINNER ROOM ACCESS FROM 4pm – 9pm

\*$2500 MINIMUM

EVERYTHING ELSE SAME AS ABOVE

TUESDAY-- FRIDAY LUNCH ROOM ACCESS FROM 11am – 4pm

\*$1500 MINIMUM

SATURDAY ENTIRE RESTRAUNT RENTAL 11-4pm

$5500 MINIMUM

Nat’s On Maple’s professional banquet staff is at your disposal to assist with the responsibilities of planning your forthcoming food and beverage functions. All reservations and agreements are made upon, and subject to, the rules and regulations of Nat’s On Maple, as they may be in effect from time to time, and the following regulations:

* Patrons expected attendance must be received by this office no later than seven business days prior to the commencement of the function. This number will be considered not subject to reduction and charges will be made accordingly. Otherwise, the guarantee listed on this banquet contract will be used as the guarantee number . In case of cancellation, all deposits are non-refundable.
* We also add on an 18% gratuity charge. By the State of Illinois Law, Illinois Sales tax is added to the cost of the function, excluding service charges. You may add an additional gratuity if you’d like.
* Nat’s On Maple will not be liable for damage to, or loss of any merchandise displayed or left anywhere, on the premises. Patron agrees to be responsible for any damage done to the premises or any other part of Nat’s On Maple, during the period the Patron, his guests, invitees, employees, independent contractors, or other agents, who are under the Patron’s control, or the control of any dependent contractor, hired by the Patron, are in Nat’s On Maple.
* No food or beverages of any kind will be permitted to be brought into Nat’s On Maple by the Patron’s guests or invitees, without prior consent of Nat’s On Maple.
* This agreement is made in the State of Illinois and shall be construed and enforced in accordance with the laws of such State. This Agreement constitutes the entire agreement between the parties and may not be modified or amended except by an instrument in writing signed by both the Patron and Nat’s On Maple.
* Use of drugs and liquor: Nat’s On Maple reserves the right to enforce its standards concerning dress and decorum at the function. Nat’s On Maple reserves the right to refuse to serve any person under the influence of alcohol or unlawful substances, or to request that such person leave the premises.
* Rooms and Rental. Nat’s On Maple reserves the right to enforce its standards concerning dress and decorum at the function. Nat’s On Maple reserves the right to re-assign space within the private function rooms if initial head count should decease or increase by 10%. A decrease in head count could mean an additional room charge will be assessed.
* If Patron shall fail to pay when due any amount payable or any reimbursable costs for damages hereunder, such amount shall bear interest at the rate of 1.5% per month, and Patron shall pay Nat’s On Maple for all of Nat’s On Maple applicable costs including collection costs, court costs and attorney’s fees.
* Prices subject to change at anytime.
* If Client is renting linens from Nat’s on Maple for their event, they must give a credit card number as a deposit to hold for damages. Client is responsible for all damages and charges from these damages. Please refrain from using wax candles on top of the linens. If wax is dripped on the linen, the wax cannot be removed, and the client will be charged the amount of the linen to be replaced.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_