

New Mount Calvary Baptist Church Food Requisition / Catering Form

Date of Request: Name of	Name of Event:		Requested By:	
Ministry:	<u>c</u>	Contact #	<u> </u>	
Date of Event:	# of People Attending:	Star	t Time:	Serving Time:

Circle One –	Breakfast	Lunch	Dinner	Snack
Menu Requested:				Special Instructions:

Cooks for Christ must receive payment 2 weeks prior to event.

<u>Grocery List:</u> (Groceries needed 2 days before event)	Amount Purchased:	Items Needed:

Please attach additional pages if necessary.

Received By:	Approved NOT Approved/Additional Information Needed	
Date	Signature & Date	

Breakfast List

Circle the items that you want served at your breakfast.

<u>Meats</u>	Eggs	Cereal & Sides
Bacon	Regular Scrambled	Hash Browns
Turkey Bacon	Zesty Scrambled	Grits
Pan Sausage	Egg Whites Scrambled	Oatmeal
Turkey Pan Sausage	Egg White Zesty Scrambled	Other
Sliced Ham	Other	
Breakfast Pork Chops		<u>Beverages</u>
Creamed Beef		Coffee
Lil Smokies	<u>Fruit</u>	Теа
Other	Honeydew	Milk
	Cantaloupe	Water
	Strawberries	Orange Juice
<u>Breads</u>	Pineapples	Grape Juice
Biscuits	Blueberries	Apple Juice
Croissants	Mango	Other
White Toast	Apples	
Wheat Toast	Watermelon	Condiments
French Toast	Grapes	Ketchup
Pancakes	Fruit Salad	Syrup
Waffles	Fruit Tray	Jelly
Muffins	Other	Hot Sauce
Other		Butter
		Other
		1

Salt, pepper, sugar, creamer, and sweetener will automatically be supplied.