



Charleston Crab House Group Information Contract

Date:

Day/Date of Group:

Time of Group:

Contact:

Email:

Phone Number:

Number of Guests:

***We require a guaranteed number of guests 48 hours prior to the event. We allow for 10% no show, but will charge \$10(+ tax and 18% gratuity) per guest for anything over 10%, for example if you tell us 40 guests and 34 guests show, we will charge for 36 guests. The person signing contract will be responsible for all charges incurred due to no show of guests.

Menu Selection:

Dining Location:

Room Charge: \$80.00 for private room

Method of Payment: Cash or Credit Card

Credit Card Number:

(Needed to secure room)

Exact Name of Credit Card:

Expiration Date:

***Credit Card will not be charged unless the group does not show without canceling; in the case of an entire group no show without cancellation the credit card may be charged at our no show fee rate.

Special Requests:

One Check or Separate Checks

The person signing the contract agrees to be responsible for any unpaid balance of any check from the group at the end of the event.

Signature_____