



# SWISD Catering Department

Catering Manager: Donna Boyette

Email: [dboyette@swisd.net](mailto:dboyette@swisd.net)

Phone #: 210-622-3911

Please read and initial by each item below indicating your understanding of the SWISD Catering Department's policies. This form must be returned to Donna Boyette before your catering request will be scheduled. Contact Donna Boyette, Catering Manager, with any questions.

\_\_\_\_\_ I understand that catering orders are for district-related events only. Catering requests cannot be fulfilled for personal and/or non-district events.

\_\_\_\_\_ I understand that a 20% additional charge will be applied to any catering event requested less than 3 business days in advance of the event. Products requested may not be available with short notice.

\_\_\_\_\_ I understand that cancelling any catering order 1-2 business days before the scheduled event will incur a 20% charge of the total catering cost.

\_\_\_\_\_ I understand that cancelling a catering order the day of the event will result in responsibility for the full cost of the event.

\_\_\_\_\_ *(If paying by cash, check, or SAF)* I understand that my catering request will not be scheduled until this form is returned to the Catering Manager.

\_\_\_\_\_ *(If paying by PO)* I understand that my catering order will not be scheduled until this form and a Requisition or PO number is provided to Donna Boyette at [dboyette@swisd.net](mailto:dboyette@swisd.net) and/or Denise Cohrs at [dcohrs@swisd.net](mailto:dcohrs@swisd.net). You can provide the Requisition or PO number below.

\_\_\_\_\_ I understand that it is my responsibility to ensure that POs created for catering orders are signed off on after the event is completed to ensure that the Catering Department is paid for their services.

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Phone #

\_\_\_\_\_  
Department or Campus

\_\_\_\_\_  
Date of Catering Event

\_\_\_\_\_  
Requisition or PO # *(only if paying by PO)*