



**Private Party Contract**

200 South Street, Philadelphia, PA 19147

Phone: 215.922.1813 [bridgetfoys@bridgetfoys.com](mailto:bridgetfoys@bridgetfoys.com)

**Please e-mail your signed contract to [Bridget@Bridgetfoys.com](mailto:Bridget@Bridgetfoys.com)  
or fax to 215 922 6551.**

Your reservation is not guaranteed until this signed contract is received. A private dining room at Bridget Foy's has been reserved for your party on: \_\_\_\_\_. We are expecting guests to start arriving at pm. At this time we have a head count of \_\_\_\_\_. On the day of your event, your party will be charged for at least this minimum number of people unless we hear otherwise. You must provide a final guaranteed guest count 72 hours prior to your event. There are no room charges, as long as the group meets the minimum of \$500 spent on food and beverage.

Final payment for all food and beverage, tax and gratuity (20%) fees are due prior to/or at the conclusion of your event. Deposit will be determined based upon either a per guest rate or a percentage of the total bill. In the event of a cancellation, within (72) hours of initial deposit, a full refund will be provided within (7-10) business days. No refund will be issued after the (72) hours.

A final guest count is required (2) business days prior to the function. This final number will then be considered a minimum guaranteed number for billing. If for any reason, a final guest count is not provided, food and beverage provided will be based on original estimated guest count. Additionally, we guarantee to serve an increase of (5%) in the estimated/final count.

The Client resumes responsibility for the guests and any damages caused by the guest(s) to the restaurant property. The restaurant assumes NO liability for personal property, while using the facility or left at the facility. We reserve the right to refuse alcoholic beverage service, should we feel it becomes necessary.

**Private party space is NOT guaranteed until a signed contract and deposit are received.**

**Host's Name:** \_\_\_\_\_

**Host's Contact Phone #:** \_\_\_\_\_

**Deposit Type/Amount:** \$300 \_\_\_\_\_

**Credit Card Number:** \_\_\_\_\_

**Credit Card Expiration Date:** \_\_\_\_\_

**Please Print the name on the credit card:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**How did you hear about us?**

google  guest of restaurant  referral  opentable  other \_\_\_\_\_