

**PLEASE FAX BACK TO  
Jennifer Stamper AT  
941-729-0007**



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CG C1505709

**GENERAL CONTRACTORS • LAND PLANNERS • DEVELOPERS**

### Grill Event Information Sheet

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

Sponsor Name: \_\_\_\_\_

Charity or Benefit Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Date of Function: \_\_\_\_\_

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

Time of Function: \_\_\_\_\_

\_\_\_\_\_

Address of Function: \_\_\_\_\_

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

\_\_\_\_\_

Fax: \_\_\_\_\_

Number of Attendees: \_\_\_\_\_

Water Available: YES or NO

Electric Available: YES or NO

Cups \_\_\_\_\_ Plates \_\_\_\_\_ Napkins \_\_\_\_\_ Sodas \_\_\_\_\_

Water \_\_\_\_\_ Beer \_\_\_\_\_ Wine \_\_\_\_\_ Ice \_\_\_\_\_ Cooler \_\_\_\_\_

Condiments \_\_\_\_\_ Utensils \_\_\_\_\_ Tablecloth(s) \_\_\_\_\_

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MENU:

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**“Z” Grill Team Responsibilities**

**Sponsor’s Responsibilities**

# of “Z” Team Needed: \_\_\_\_\_

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“Z” Grill Team Acceptance: \_\_\_\_\_

Sponsor Acceptance: \_\_\_\_\_