

AN EVENING AT AMERICAN KITCHEN FUNDRAISER REQUEST FORM

All requests must be submitted at least 2 weeks in advance. Upon approval you will be emailed a distribution flier. Please fill out the following information completely and return in person to your local O's American Kitchen's General Manager.

Today's Date _____

Organization Name _____

Contact Name _____

Mailing Address _____

City/State/Zip _____

Telephone Number _____

Fax Number _____

E-mail Address _____

Restaurant Location _____

Date of Event _____

1st Choice _____

2nd Choice _____

NOTE: O's American Kitchen reserves the right of approval of this proposal. This fundraiser may be terminated and/or canceled by either party at any time up until 24 hours prior to the day of the event. No guarantees or warranties of any kind are made by either party as to the success of the event. It is the responsibility of the Organization Representative to maintain the integrity of the event and ensure regular O's American Kitchen guests are not solicited to participate in the fundraiser. Any deviation could result in the suspension of this event and future events.

O's American Kitchen Representative _____ Date _____

Organization Representative _____ Date _____

Please submit this form in person to your local "O's American Kitchen.

For your nearest O's American Kitchen location go to:

www.OsAmericanKitchen.com

