



## MARKET CROSS PUB & BREWERY

### OFF-PREMISE BAR CATERING 2020

#### **Beverage Options:**

##### Non-alcoholic Station

\$3/person includes 2 sodas, iced tea, lemonade and bottled water and disposable cups.

##### Coffee and Tea Station

\$2/person includes Coffee, Decaf and Hot Tea station and disposable mugs.

##### Beer & Wine Bar

\$22.50/person includes 2 draft domestic beers, 2 craft bottles, 2 white wines and 2 red wines, iced tea, lemonade, bottled water, bartenders, disposable cups, ice, table linens for bar, fresh flowers for bar and liquor liability for 5 hour event.

##### Premium Full Bar

\$33.00/person includes 1 signature drink, 5 premium liquors, 2 draft domestic beers, 2 craft bottles, 2 white wines and 2 red wines, traditional mixers and garnishes, bottled water, bartenders, disposable cups, ice, table linens for bar, fresh flowers for bar and liquor liability for 5 hour event.

##### Top Shelf Full Bar

\$50.00/person includes 1 signature drink, 5 premium liquors, 5 top shelf liquors, 1 draft



domestic, 1 draft craft beer, 2 white wines, 2 red wines, traditional mixers and garnishes, bottled water, sparkling water, bartenders, glassware, ice, table linens for bar, fresh flowers for bar and liquor liability for 5 hour event.

**Cash Bar Setup:** \$300/event includes bartenders, liquor liability for the event, chosen alcohol, cups, ice and linens for bar.

**Bartender Rental:**

\$25/hour includes RAMP certified Bartender. Does not include liquor liability for event.

Off-premise Catering: If you are interested in bringing the Market Cross Pub to you, please contact Ashleigh at [ashleigh@marketcrosspub.com](mailto:ashleigh@marketcrosspub.com).

Please visit [www.marketcrosspub.com](http://www.marketcrosspub.com) for our catering menu.



## EVENT CONTRACT

### Event Details

Customer Name: \_\_\_\_\_

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

Email: \_\_\_\_\_

I have read the banquet menu and agree to the guidelines; I will give the Market Cross Pub at least 1 week notice to cancel the event or I will pay 50% of the estimated total.

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

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

Expiration Date: \_\_\_\_\_ Zip Code: \_\_\_\_\_

This card will be filed and charged only if the party is canceled with less than 1 week notice.

113 North Hanover Street, Carlisle, PA 17013 717-258-1234