Dining Services Camp/Conference Count Sheet

Camp/Conference Name: ________________________________

Contact Person: ________________________________

Date Camp Begins: ___________  Ends: ___________

Contact Phone: ________________________________

Contact Email: ________________________________

**Meal Times:** complete only if requesting times different from those listed on the enclosed Reservation form.

- Breakfast: AM
- Lunch: AM or PM
- Dinner: PM

Complete the table below by first writing in the dates for the corresponding days of the week that your camp will be in session. Then, fill in the number of people you expect to feed for each meal on each day of the camp. Please remember to take into account differences in numbers that may exist between meals due to commuters to your camp/conference. Draw an “X” through any meal that you are planning on making arrangements for outside of University Dining. Sign and date below.

<table>
<thead>
<tr>
<th>MEAL</th>
<th>Friday, Date:</th>
<th>Saturday, Date:</th>
<th>Sunday, Date:</th>
<th>Monday, Date:</th>
<th>Tuesday, Date:</th>
<th>Wednesday, Date:</th>
<th>Thursday, Date:</th>
<th>Friday, Date:</th>
<th>Saturday, Date:</th>
<th>Sunday, Date:</th>
<th>Monday, Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Breakfast</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lunch</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dinner</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Special Requests: ____________________________________________________________
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________

Signature: ___________________________  Date: _________________