

Cook Application Form

	ON	C Cooks must be shareholder	·s
	OIV		
Full Name:			
run Name.	Last	First	M.I.
Address:			
	Street Address		Apartment/Unit #
	City	Ctata	ZIP Code
	City	State	ZIP Code
Home Phone:		Email Address:	
		Mandatory Information	
Each Meal should	contain a minimum of:		
• Two (2) mai	n dishes		
• Two (2) side	dishes		
 Two (2) sala 	ds		
• Two (2) des	sert		
24 hours in advance	nable to cook when you we	-	l you please notify the office a Minimum of so we can make alternate arrangements
Delivery Time:			
Food should be deli	vered to the Ouzinkie Nati	ve Corporation building by 11:30	a.m.
Serving:			
	od covered in disposable co	ntainers.	
Please set up the foo	<u>-</u>		
•	provide disposable dishes, p		
•	staff to have disposable dis		
Transfer foc	•	and take your dishes with you.	
	Paym	ent via Check Upon Delivery of fo	od.
Please sign below to	confirm your agreement to	abide by our procedures and expe	ctations of service.
Date of Lunch:	Cook'	s Name (please print):	
		(h	

Cook's Signature: _____Today's Date: _____