



## Restohub Wine Services Request Form

### Client Information

Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_  
State \_\_\_\_\_ Zip \_\_\_\_\_  
Email address \_\_\_\_\_  
Phone # \_\_\_\_\_ ext \_\_\_\_\_ Alternate Phone # \_\_\_\_\_  
Company Name \_\_\_\_\_ Contact Name \_\_\_\_\_

### Services Requested

<input type="checkbox"/> Bar Principles Training	<input type="checkbox"/> Wine Displays	<input type="checkbox"/> Wine Seminars
<input type="checkbox"/> Accounting	<input type="checkbox"/> Inventory & Control	<input type="checkbox"/> Staff Service Training
<input type="checkbox"/> Wine Testing	<input type="checkbox"/> Beverage Program	<input type="checkbox"/> Wine Supplying
<input type="checkbox"/> Maintenance	<input type="checkbox"/> Cost Analysis	<input type="checkbox"/> AA Meetings
<input type="checkbox"/> Bev. Development List	<input type="checkbox"/> TAM Classes	<input type="checkbox"/> Designing Projections
<input type="checkbox"/> Beverage Menu Design	<input type="checkbox"/> Uniforms	<input type="checkbox"/> Wine Cellar Design
<input type="checkbox"/> Decorations	<input type="checkbox"/> Bar Utensil Supplies	<input type="checkbox"/> Purchasing System & Suppliers
	<input type="checkbox"/> P & L Analysis	<input type="checkbox"/> Employee Handbook

### Overall Service Request Briefing (Be Specific & Detailed)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date \_\_\_\_\_ Time \_\_\_\_\_ Location \_\_\_\_\_  
By email \_\_\_\_\_ Best Time Available \_\_\_\_\_ By Conference Call \_\_\_\_\_

### Billing Information

Name as listed on the Credit Card \_\_\_\_\_  
Billing Address of Credit Card (including zip code) \_\_\_\_\_  
\_\_\_\_\_  
Credit Card Type \_\_\_\_\_ CC # \_\_\_\_\_ Exp Date \_\_\_\_\_ CVV2/CID \_\_\_\_\_  
Authorized Signature \_\_\_\_\_ Date \_\_\_\_\_

Call us for information and a **Free First** Consultation.  
DO NOT send this form as an attachment for your initial request.

To finalize and process your request, please fax this form to:  
**Restohub Wine Services** at 702 202-0819.

Call us for a Confirmation Authorization Code

Request # \_\_\_\_\_ (Internal Use Only)