



SOTTO SOTTO CATERING REQUEST FORM

First Name: _____ Last Name: _____

Company: _____

Daytime Phone: _____ Evening Phone: _____

E-mail: _____

Occasion: _____

Event Date: _____

Party Size: _____

Budget per person: _____

Type of Event (*sit down service* or *buffet*): _____

Start Time: _____ Finish Time: _____

Notes/ Additional Info: _____

Reset

Submit Form

Please fill out and **SUBMIT**, or save and email to info@sottosotto.ca at your earliest convenience and one of our catering specialist will be in touch with you to follow up.

Thank you for choosing Ristorante SOTTO SOTTO Toronto

SOTTO SOTTO CATERING
120 AVENUE ROAD
TORONTO, ON M5R 2H4
(416) 962-0011
INFO@SOTTOSOTTO.CA

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