

Starter Pack for *Desert Camp* and *Desert Quiver Camp*

NAME: _____

DATE: (when food is required) _____

ROOM NUMBER: _____

NUMBER OF PERSONS: _____

Please hand in this completed form to our Reception at **Desert Camp** or **Desert Quiver Camp** no later than **16:30 hours**.

	Qty	Portion	Price N\$	TOTAL
MEAT FOR BBQ (Uncooked; Marinated)				
Pork chops (150 - 180 gr)		Per Chop	50,00	
Beef Rump Steak (350 gr)		Per Portion	85,00	
Oryx Steak (100 - 150 gr)		Per Steak	45,00	
Boerewors (100 gr)		Per Piece	35,00	

SUBTOTAL _____

CHICKEN FOR BBQ (Uncooked; Marinated)				
Chicken Wings		Per Wing	25,00	
Chicken Breast Fillet		250 gr	50,00	

SUBTOTAL _____

VEGETABLES (Uncooked)				
Potato Wrapped in Tinfoil		each	25,00	
Tomato		each	15,00	
Onion		each	15,00	
Vegetables STIR FRY Raw		400 gr	75,00	

SALADS (Ready-Made)				
Beetroot Salad		200g	55,00	
Potato Salad		200g	55,00	
Pasta Salad		200g	55,00	
Coleslaw		200g	55,00	

BREAD				
Brown Bread		slice	5,00	
White Bread		slice	5,00	
Garlic Bread - Loaf		each	65,00	
Braai Broodjies - Cheese		6'	95,00	

SPREADS (Single Servings)				
Mini Butter		each	6,00	
Jam Portions		each	6,00	
Cheese slices		each	15,00	

SUBTOTAL _____

BEVERAGES

A full selection of alcoholic and non-alcoholic beverages are available at the bar

Kindly indicate the Camp where you stay


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Vegetable Oil 375 ml		each	45,00
Bundle of Wood		each	75,00
1 x Firelighter		each	5,00

TOTAL PRICE N\$

The total price is automatically added to your room account and must be settled in full prior to your departure.

All items are subject to availability - Please indicate below whether an alternative is acceptable or not.

Alternatives YES ☐ NO ☐

If yes, please specify: _____

The food will be delivered at your room shortly after 18h00 (6 pm) on the requested date. Please check your order and sign receipt thereof.

Guest	
The food was received in good order	
NAME: _____	DATE: _____
SIGNATURE: _____	TIME: _____
COMMENT: _____	

~ Bon Appetit ~

Company use	
KITCHEN: food packed & checked by	
NAME: _____	SIGNATURE: _____

