

Thank you for choosing Applejack Wine & Spirits! Please take a moment to answer the following questions and review our policies. You should expect to receive an estimate from one of our event planners within 48 hours.

CONTACT INFORMATION

Please provide a name, address, phone number, email and event date to set up the order in our system. * Information below is required:

First Name * Last Name *
Complete Billing Address * City State Zip Code
Phone Number *() E-mail Address *
Day of Event contact name and phone number
01. Are you picking up your order in store, or would you like us to deliver? (Delivery is limited to the Denver Metro area and additional select locations) * □In-Store Pickup □Delivery Date: MonthDayYear
What time does your event start?
If we are delivering; please provide a 2 hour delivery window:
If we are delivering; please provide the complete address and name of the venue:
02. How many guests attending the event will be drinking alcohol? *
03. How would you like your percentage allotted (e.g. 40% Beer, 40% Wine, 20% Liquor)? *
04. During your event, how many hours will you be serving alcohol? *
05. Will you be serving a full bar? * □Yes □No
06. If you are having a full bar, what type of spirits would you like to serve? * Select all that apply. Use the "Other" field to indicate other spirit requests. □Whiskey □Vodka □Tequila □Rum □Gin □Other:
07. What quality tier would you like for your spirits? * □Well (i.e. Svedka Vodka) □ Mid-Shelf (i.e. Absolut Vodka) □ Top-Shelf (i.e. Grey Goose)



08. What type of beer	would you like? * (Sele	ect all th	at apply)			
Domestic	□Craft	□Bo	ttles	□ Cans	□Keg	
Please enter specific beer requests (breweries, specific beers, styles, etc.) below:						
09. What type of wine? (Select all that apply)						
□Red Blend □Cabe	ernet Sauvignon 🗆 Pin	ot Noir	□White	□ Chardonnay	□Pinot Grigio □Other:	
10. What per bottle price range would you like for the wine (e.g. \$10-12, \$15-25)? *						
11. Do you need Cham	paane/Prosecco for a t	toast?	□ Yes	□No		
(If yes, select your preference)						
	• •					
12. Do you need sodas or water from us? (Please be specific) *						
13. Do you need ice? If yes please check appropriate box below.						
□Chillin	ng □Drinks only ∣	□Both				
14. Do you need your order chilled?						
15. Do you need mixers	< ° *					

16. Will you be serving a signature cocktail? (If yes, please be specific)

17. Who can we thank for the referral? *

PLEASE NOTE: Pick ups are an additional service. We do not offer same day pick up. All pick ups must be scheduled with your event planner. There will be a \$30.00 fee deducted from your return.