



Pharmaceutical Function

Private Dining Menu

\$ 125.00 ALL INCLUSIVE We INCLUDE

Four-course Meal, Soft drinks, Coffee, Tea, Optional 2 glasses of wine or Beer per guest,
6% sales tax and 20% gratuity.

Appetizer Selections - Choose one

- SHRIMP COCKTAIL**
- Halloumi Cheese** Served with tomato. Traditional from Cyprus
- Large Bowl of Sautéed Fresh Mussels**
- YELLOWFIN TUNA** Served with a Wasabi Dipping Sauce
- CAJUN BARBECUE SHRIMP**
- Chef's Seafood Soup**

Salad - Choose one

- Tavern's Specialty Salad**
A Fresh combination of Specially Selected Greens, Topped with our own Vinaigrette.
- Tavern's Greek Salad**
A Fresh combination of Specially Selected Greens, Greek Vinaigrette.
- Caesar Salad**
Tossed Crispy Romaine with the Taverns Caesar Dressing

Entrée Selections - Choose four for your guest to Select from.

- Grilled King Salmon.** with Roasted Mushrooms, Sundried Tomato, Fresh herb Crème Fraiche
- Yellow Fin Tuna Steak** Sushi Grade #1 TUNA. The Tavern's Recipe, Served with a Wasabi Dipping Sauce
- Fresh Fish of the Day.** Caper lemon Butter
- Old School Sautéed Garlic Prawns & Pasta** Known in Italian-American homes as Shrimp Scampi.
- Herb Grilled Chicken with Asparagus** in Piccata Sauce.
- Chicken Cacciatore.** Sautéed Chicken with Italian Peppers, Tomatoes and Onions.
- Chicken in Vodka Pepper Sauce with Cajun Andue Sausage**
- Kansas City NY Strip Steak.** Bone in Strip.
- Steak Dianne** 6oz Filet Mignon With Brandy Peppercorn Sauce.
- Vegetarian Pasta** Sautéed fresh vegetables with marinara sauce over linquine.

Roasted Potato of the day with Seasonal Fresh Vegetables

Dessert Selections. - Choose one

- Ice Cream
- Chocolate Cake
- Rice Putting



FUNCTION AGREEMENT

109 Howard Street, Enola PA 17025 717-732-2077 (P)

717-732-6260 (F)

Contact Name: _____

Group / Event Name: _____

Phone: _____ Fax: _____

EMAIL _____

Date of Event: _____ Event Time _____

Expected Number of Attendees _____

Do you need any A/V Equipment?

_____ We need an LCD Projector (\$175.00)

_____ We need a Screen (\$40.00)

Agreement

This form must be signed and returned via fax, US Mail or scanned and emailed to the Tavern on the Hill prior to the event date in order to acquire your reservation.

Required to reserve your room :

We Will Charge upon receiving this form A NON REFUNTABLE Deposit on Credit Card of \$60 per person that you Expected to Attend.

The balance of \$65 per person that you Expected to Attend the function on the day that this agreement was signed, plus any A/V equipment charges will be charged at the day of the function.

(* This fee may no be substituted by any other item.)

Credit Card #: _____

Expiration Date: _____

I have Read and Agree to the Policies of Tavern on the Hill

Printed Name

Date