

Professional Lunch Prep Checklist

Lunch Scheduled at office of: _____

Office contact name _____ Phone # _____

Address _____

Date of lunch: M T W T H F _____ Time _____

Approximate # of guests _____

Dietary restrictions & allergies _____

Provider

Schedule on personal calendar with a 48-hour reminder

Receptionist

Block office appointments for provider(s)

Office Coordinator (two working days prior to lunch)

Confirm date, time, # of guests, and menu with office

Order lunch & dessert

Confirm providers schedule is blocked adequately

Prepare any requested literature

Provider (day of lunch)

Confirm lunch order & delivery time with restaurant, including drinks and utensils

Rehearse discussion points and materials