



Please Complete, Check the Box Next to Item Desired, and Fax to:  
ATTN Room Service/562-435-3788



Date of Request: \_\_\_\_\_  
 Guest Name: \_\_\_\_\_ Delivery Date: \_\_\_\_\_  
 Check In/Out Date: \_\_\_\_\_ Delivery Time: \_\_\_\_\_  
 Note for Card: \_\_\_\_\_

- |  |                          |    |  |                          |    |
|--|--------------------------|----|--|--------------------------|----|
| <b>The Cheese Monger</b><br>International and Domestic Cheeses, Served with Crackers, Crostini and Fresh Berries (Service for Two) | <input type="checkbox"/> | 24 | <b>Salsa En Fuego</b><br>Our Housemade Fire Roasted Salsa and Salsa Fresca Tortilla Chips, Fried Plantain Chips        | <input type="checkbox"/> | 18 |
| Service For Four   | <input type="checkbox"/> | 48 | Add Two Coronas, with Lime   | <input type="checkbox"/> | 12 |
| <b>Goddess Fruits</b><br>Handpicked Seasonal Whole and Sliced Fruit, Nuts, Yogurt Dip  | <input type="checkbox"/> | 35 | <b>DoubleTree Cookie Monster</b><br>Three Freshly Baked Signature DoubleTree Cookies Chilled Milk (Item Contains Nuts) | <input type="checkbox"/> | 16 |
| <b>The Tempress</b><br>Six Chocolate Dipped Strawberries, Whipped Cream  | <input type="checkbox"/> | 25 | <b>Mayan Delicacy</b><br>Three Hand Rolled Truffles Served with Espresso Tequila                                       | <input type="checkbox"/> | 25 |
| <b>Workaholic</b><br>Dried Fruit, Nuts, Chocolate Candies and Voss Water   | <input type="checkbox"/> | 18 | <b>DIY Margarita</b><br>Premium Tequila, Fresh Agave Nectar, Lime Juice Shaker, Salted Glass & Recipe Card Included    | <input type="checkbox"/> | 28 |
| <b>Mexican Street Delight</b><br>Mini Churros, Hot Chocolate Dipping Sauce   | <input type="checkbox"/> | 25 |  |                          |    |
| <b>Agave Chocolate</b><br>Six Chocolates per box   | <input type="checkbox"/> | 13 | <b>Cutie Pie</b><br>Locally Produced Pie, Served in a Mason Jar  | <input type="checkbox"/> | 10 |

- Bubbles**
- |                |                          |    |
|----------------|--------------------------|----|
| Moscato        | <input type="checkbox"/> | 36 |
| Sparkling Cava | <input type="checkbox"/> | 40 |
| Sparkling Rose | <input type="checkbox"/> | 40 |

- Red**
- |                    |                          |    |
|--------------------|--------------------------|----|
| Garnacha de Fuego  | <input type="checkbox"/> | 40 |
| Pinot Noir         | <input type="checkbox"/> | 40 |
| Cabernet Sauvignon | <input type="checkbox"/> | 36 |

- White**
- |                 |                          |    |
|-----------------|--------------------------|----|
| Pinot Grigio    | <input type="checkbox"/> | 40 |
| Sauvignon Blanc | <input type="checkbox"/> | 40 |
| Chardonnay      | <input type="checkbox"/> | 36 |

- Bucket Cerveza (Choose Six)**  35
- |                                       |  |
|---------------------------------------|--|
| <input type="checkbox"/> Pacifico     | <input type="checkbox"/> Shock Top     |
| <input type="checkbox"/> Corona       | <input type="checkbox"/> Budwiser      |
| <input type="checkbox"/> Negro Modelo | <input type="checkbox"/> Bud Light     |
| <input type="checkbox"/> Heineken     | <input type="checkbox"/> Lagunitas IPA |

- Signature Sangria**
- |             |                                   |                                     |
|-------------|-----------------------------------|-------------------------------------|
| Red Berry   | <input type="checkbox"/> 12 Glass | <input type="checkbox"/> 38 Pitcher |
| White Peach | <input type="checkbox"/> 12 Glass | <input type="checkbox"/> 38 Pitcher |



### Credit Card Authorization

I hereby authorize Hotel Maya, a DoubleTree by Hilton to authorize my credit card to pay for the charges specified above, \$3 delivery fee, current sales tax, and 18% service charge. Please include clear photocopies of the following items along with this completed form. Without these items we cannot process your order.

- \*Copy of Front and Back of ID
- \*Copy of Front and Back of Credit Card

Credit Card Number: \_\_\_\_\_ Expiration \_\_\_\_\_

Name of Card Holder: \_\_\_\_\_

Billing Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

For Questions, Call 562-481-3908

All Requests Require 24-hours notice.

Signature of Card Holder: \_\_\_\_\_

