



CHICAGO BOTANIC GARDEN

Group Visits

1000 Lake Cook Road Glencoe, IL 60022

Phone: (847) 835-6949 • Fax: (847) 242-6318

BOXED MEAL

\$30 with choice of one tour OR \$35 with choice of two tours

Boxed Meal Selections (Lunch is available at 11:30 a.m. or 1 p.m.)

*Note: As the group leader, you may choose **two** boxed lunch options, from which your participants will select one.*

Please indicate the exact number of each meal.

Cranberry Almond Chicken Salad on a Croissant

of meals _____

Diced Cooked Chicken Breast, Dried Cranberries, Celery, Mayonnaise, Salt, Pepper,
Toasted Slivered Almonds, Leaf Lettuce & Croissant

Turkey & Brie on a Croissant

of meals _____

Sliced Smoked Turkey, Leaf Lettuce, Brie & Croissant

Sandwich Duo

of meals _____

Duo of Petit Sandwiches – Smoked Ham and Roasted Turkey – Served on Silver-Dollar Rolls

Roast Beef on Whole Wheat

of meals _____

Sliced Roast Beef, Shredded Lettuce, Diced Tomato & Sliced Cheddar on Whole Wheat

Roasted Vegetable and Mozzarella Wrap

of meals _____

Eggplant, Zucchini, Yellow Squash, Portobello, Red Onion, Red Pepper, Balsamic Vinaigrette,
Mozzarella, Cream Cheese & Leaf Lettuce in a Spinach Wrap

Chicken Caesar Salad

of meals _____

Grilled Chicken Breast with Olive Oil, Salt, Pepper, Balsamic Marinade, Romaine Lettuce,
Caesar Dressing, Asiago Cheese & Croutons

L.A. Grilled Chicken Cobb Salad

of meals _____

Grilled Chicken Breast with Olive Oil, Salt, Pepper, Balsamic Marinade, Romaine & Iceberg Lettuce,
Chopped Bacon, Diced Tomato, Diced Avocado, Blue Cheese, Cheddar Cheese & Hard-Boiled Egg with Ranch Dressing

SPECIAL NOTES:

- NO SUBSTITUTIONS.
- All sandwiches include a pasta salad, beverage, and homemade cookies.
- Salads include fresh baked bread, beverage, and homemade cookies.
- Beverages include unlimited iced tea, coffee, and ice water.
- Soda may be added for an additional \$2 per person. Soda variety includes a preselected combination of Coke, Diet Coke, and Sprite.
- Table linen for each dining table may be added (your choice of color) for an additional \$5 per person.

Check to add on: _____ **Soda (\$2 per person)**
_____ **Table Linen (\$5 per person)**

Group Name: _____

Today's Date: _____ Date of Visit: _____ Total # of Guests: _____

Contact Name: _____ Contact Phone #: _____

Menu selection and guaranteed number must be submitted to the group visits department at fax (847) 242-6318 no later than **10 BUSINESS DAYS** prior to the visit date. The Chicago Botanic Garden reserves the right to select your menu if one is not chosen at this time.

FOR CBG OFFICE USE ONLY: Location: _____ Time: _____