

**Accommodations Vail* Beaver Creek, LLC
Grocery Delivery**

Name: _____ Arrival Date: _____ Arrival Time: _____ Reservation #: _____

Please complete the grocery list below. Check the type of groceries and specify the quantities you would like to be delivered to your home. In order to guarantee delivery, please return this form no later than 1 week prior to your arrival. Groceries will be delivered by 5pm the day of arrival. If items are unavailable, would you prefer a substitution? Yes No
A \$25 delivery charge and 20% service charge will be added to your bill.

Fresh Vegetables
1 bag carrots _____
Mushrooms _____
Green Pepper _____
Red Pepper _____
Celery _____
Cucumber _____
Lettuce _____
Onions _____
Type _____
Tomatoes _____
Avacado _____
Garlic _____
Potatoes _____
Red or Russet _____

Fruits (Specify lbs. or pieces)
Red Apples _____
Granny Smith _____
Bananas _____
Cantaloupe _____
Grapes _____
Lemons _____
Limes _____
Oranges _____
Pears _____
Grapefruit _____

Condiments
Dijon Mustard _____
Yellow Mustard _____
Ketchup _____
Mayo _____
Light Mayo _____
BBQ Sauce _____
Salad Dressing _____
Flavor _____
Pickles _____
Olives _____
Olive Oil _____
Vegetable Oil _____

Baking Supplies
Equal _____

Wheat Thins _____
Peanuts _____

Chips
Potato Chips _____
Flavor _____
Pringles _____
Flavor _____
Tortilla Chips _____
Flavor _____
Thin Pretzels _____
Microwave Popcorn _____

Dips
Ranch Dip _____
Salsa _____
Mild Medium Hot
Hummus _____

Cookies
Chips Ahoy _____
Oreos _____
Fig Newtons _____

Cheese
Deli Sliced _____
Flavor _____
Block of Cheese _____
Flavor _____
Shredded Cheese _____
Flavor _____
Cream Cheese _____
Cottage Cheese _____

Dairy
Whole Milk _____
2% Milk _____
1% Milk _____
Skim Milk _____
Half & Half _____
Yogurt _____
Flavor(s) _____
Sour Cream _____
Butter _____
Margarine _____
Dozen Eggs _____

Frozen Foods
Frozen Pizza _____
Vegetables _____
Types _____
French Fries _____
Hash Browns _____

Sugar _____
Salt / Pepper _____
Spices - _____
Type _____
Cake Mix _____

Pasta / Rice
Pasta _____
Type _____
Sauce _____
Flavor _____
Rice _____

Red Meat (indicate # pieces & amount)
T-Bone _____
New York Strip _____
Hamburger _____
Filet Mignon _____

White Meat
Chicken _____
Boneless Breasts _____
Other _____
Pork Chops _____

Breakfast Meat
Sausage Links _____
Bacon _____

Deli Meats (in lbs.)
Turkey _____
Ham _____
Roast Beef _____
Salami _____
Hot Dogs (8 packs) _____

Canned Goods
Fruit _____
Type _____
Vegetables _____
Type _____
Soup _____
Flavor _____
Chili _____

Waffles _____

Desserts
Donuts (Assorted) _____
Muffins (Assorted) _____
Apple Pie _____
Pecan Pie _____
Pumpkin Pie _____
Ice Cream _____
Flavor _____

Treats
Snickers _____
M&M's _____
M&M's Peanut _____
Reese's Minis _____

Breads & Spreads
White _____
Wheat _____
Sour Dough _____
Rye _____
Pita Bread _____
6 Bagels _____
Flavor _____
6 English Muffins _____
Hotdog Buns _____
Burger Buns _____
Peanut Butter _____
Crunchy Smooth
Jelly / Preserves _____
Flavor _____
Honey _____

Spaghettios _____
Baked Beans _____
Tuna _____

Hot Drinks
Coffee (Brand) _____
Regular Decaf _____
Coffee Filters _____
Tea _____
Flavor _____
Hot Cocoa _____

Cereal/Pancake Mix
Cheerios _____
H/Nut Cheerios _____
Wheaties _____
Rice Crispies _____
Frosted Flakes _____
Raisin Bran _____
Corn Flakes _____
Quaker Instant Oatmeal _____
Flavor _____
Pancake Mix _____
Maple Syrup _____

Beverages
Coke Diet _____
Pepsi Diet _____
7-Up Diet _____
Evian _____
Perrier _____
Gatorade _____
Flavor _____
Tonic Water _____
Club Soda _____
Apple Juice _____
Cranberry Juice _____
Orange Juice _____

Crackers
Triscuits _____
Ritz _____
Carris _____
Saltines _____

Additional Grocery Requests

Beer (12 packs)
Domestic
Bud _____ Light _____
Coors _____ Light _____
Imports
Heineken _____
Amstel Light _____
Corona _____
Micro Brews
Sierra Nevada _____
Breckenridge _____
Liquor and Mixes
(Specify type and quantity below)

Wine (Please indicate the amount you would like us to spend and specify a brand if required)
Cabernet Sauvignon
\$: _____ Brand: _____
\$: _____ Brand: _____
Merlot
\$: _____ Brand: _____
\$: _____ Brand: _____
Chardonnay
\$: _____ Brand: _____
\$: _____ Brand: _____
Champagne
\$: _____ Brand: _____

**Attn. Tonic
Please fax completed form to 970-949-0743**