



Party Reservation Credit Card Authorization Form 6 persons or more

**For 6 (six) persons or more group booking form to be completed & returned
Thank you for your enquiry. Please complete this form fully to ensure confirmation of your booking.**

Group reservations are only accepted with a completed booking form.

Reservation Name _____

Telephone (H) _____ (C) _____ (O) _____

Email _____

Date of Reservation ____/____/____ Time of Reservation ____am ____pm

Number of Persons Adults _____ Children _____

Special Requests _____

CREDIT CARD DETAILS (Please fill in all blanks)

Name of Card Holder _____

Type of Card ___MasterCard ___VISA ___Discover

Card Number _____ - _____ - _____ - _____ Exp. Date ____/____

Credit Card Security ID Number _____ *For Visa and MasterCard – The last 3 digits on the signature panel.

CANCELLATION TERMS

The following fee will apply to above credit card upon notification of cancellation

Cancellation within 12 hours or moreNO FEE

Cancellation within less than 12 hours or NO SHOWUS\$50.00 / person

Please understand that it is not our intention to charge you, however, a phone call or an email only takes a moment. Kindly plan appropriately and honor our commitment to each other.

NO RESERVATION IS CONFIRMED UNTIL THIS FORM IS SIGNED AND RETURNED BACK TO US.

**Please email the completed form to emberanguilla@gmail.com.
If you need help with the form, please call 1-264-498-2411 or email us.**

In the event of a reduction in the final number of persons after confirmation, full charge will be levied on the number of persons confirmed and the Restaurant reserves the right to choose an alternative location within the restaurant to accommodate your party.

I hereby agree to the above terms and conditions and understand that the cancellation fees stated above will not be refundable in the event of a cancellation or no-show.

Signature of Cardholder _____ **Date** _____

(As shown on the credit card)