



120 PRODUCE ROW
SAN ANTONIO, TX 78207

T: 210.227.7140 • F: 210.227.3097

DATE: _____

CREDIT CARD AUTHORIZATION

DATE OF EVENT: _____ TIME: _____

RESERVATION NAME: _____

BUSINESS NAME ON CREDIT CARD: _____

CARDHOLDER NAME: _____

DRIVERS LICENSE#: _____ STATE: _____ EXP. _____

STATEMENT BILLING ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE#: _____

CIRCLE ONE: AMEX MASTERCARD VISA DINERS DISCOVER

CARD#: _____ EXPIRATION: _____

AMOUNT \$: _____ CID: _____

This is the 3-4 digit security code printed on the back of your credit card or front of your AMEX card.

I the above cardholder/authorized card member by signing do authorize the above amount to be charged to the listed credit card account.

AUTHORIZED SIGNATURE: _____

OFFICE USE ONLY

AUTHORIZATION CODE: _____

TAKEN BY: _____ DATE: _____