



**CREDIT CARD PAYMENT AUTHORIZATION**

I, \_\_\_\_\_, hereby authorize the Five Sails Restaurant to charge all expenses incurred as indicated to the following credit card.

NAME ON CREDIT CARD: \_\_\_\_\_

COMPANY NAME: \_\_\_\_\_

CARD TYPE AND NUMBER: \_\_\_\_\_

EXPIRY DATE: \_\_\_\_\_

AUTHORIZED SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

RESERVATION \_\_\_\_\_ DATE: \_\_\_\_\_

- \_\_\_\_\_ All Charges
- \_\_\_\_\_ Food
- \_\_\_\_\_ Beverage
- \_\_\_\_\_ Deposit \_\_\_\_\_

\*Please refer to cancellation guidelines

\_\_\_\_\_ Gift Certificate \_\_\_\_\_

\* Please note that gift certificates are not redeemable for cash/credit

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