LA GRENOUILLE

3 East 52nd Street New York, NY 10022
Reservations: (212) 752-1495 ~ Private Parties: (212) 752-0652 ~ Fax: (212) 593-4964
www.la-grenouille.com

Credit Card Authorization Form

Attn:_____ **Fax#**_____**Tel.#**_____

1. Unlimited Dollar Amount ☐ (check box to select this option)

I, ……..…….. hereby authorize La Grenouille, Inc. to charge my credit card
for **all** ☐ lunch or ☐ dinner charges (including beverages, wines, N.Y. tax, and gratuity of 20%)
for the reservation of ……..…….. on (date)……..
for …….. persons at ……

2. Limited Dollar Amount (if you want to pay a set dollar amount) ☐ (check box to select this option)

$

I, ……. hereby authorize La Grenouille, Inc. to charge my credit card
in the amount of $ …… (tax & gratuities not included) for the reservation of ……
on (date)…… for …….. persons at ……

3. Wines ☐ (check box to select this option)

I, ……..…….. hereby authorize La Grenouille, Inc. to charge my credit card
for the sale of a bottle of ……..
(plus N.Y. tax and gratuity of ……..%) for the reservation of ……
on (date)…… for ……persons at ……

Donor Credit Card Information

Credit Card Type: ☐ **MasterCard** ☐ **Visa** ☐ **American Express** ☐ **JCB**

Credit Card Account Number: ☐☐ ☐☐☐☐ ☐☐☐☐ ☐☐☐☐

Security Code: ☐☐☐☐ 3 or 4 digits

Expiration Date: ☐☐/☐☐

Donor/Presenter's Name:

Name as it appears on Credit Card:

Credit Card Billing Address:

Authorized Signature of Credit Card Holder:

Telephone Number of Credit Card Holder: