



— THE LOEB —
BOATHOUSE
CENTRAL PARK

Credit Card Authorization Form

*Please complete and return this form to boathousereception@pollgroup.net
– with copies of your credit card (front and back) – at least 48 hours prior to the reservation date.*

Reservation Details

Please complete all fields

Reservation Date: _____ / _____ / _____ Reservation Time: _____

Guest's Name: _____ Number of Guests: _____

Special message or greeting: _____

Please indicate what you will be paying for

- The entire check for the guest (including tax and 15% gratuity)
- I am paying only a portion of the check: \$ _____
- The following bottle of wine (including tax and 15% gratuity): _____
- The following cake (including 8.875% sales tax): _____
(Please include cake order form for flavor, size and cost details.)

Credit Card Details

Please attach a copy of your card as well. We must have copies of the front and back

Cardholder's Name: _____

Phone Number: _____ Cell Phone Number: _____

Billing Street Address: _____

Apt/Suite/Floor: _____

City: _____ State: _____ Zip: _____

Please charge my: AMEX VISA DISCOVER MASTERCARD

Account Number: _____ Exp. Date: _____

CVV: _____ In the amount of: \$ _____

Cardholder Signature: _____