

CHRISTIANI'S VIP CATERING SERVICE, LTD
1150 SE Diehl Des Moines, IA 50315
Ph. (515)287-3169 Fax (515)285-5576

Authorization to Charge Credit Card

Name of Cardholder: _____

Phone: Home _____ Work/Cell _____

Address _____

Type of Credit Card: **Visa** **MasterCard** **Discover** **Am Ex.**

Credit Card # : _____ Exp. Date: _____ CVV: _____

Name of Group: _____

Date of Event _____

Please note: A 3% surcharge will be added to all credit card transactions. If you are providing us with a debit card, our credit card authorization system captures these funds automatically- taking the money out of the bank account. The debit will be posted to your account immediately, but if you eventually pay by another method, **your bank may take up to 10 days to reverse this original charge** and credit the bank account. By signing below, you are authorizing this procedure.

As a signer on the card listed above, I authorize CHRISTIANI'S VIP CATERING to charge this card for all charges that are applied to my bill.

Signature of Cardholder: _____

For Office Use Only

Organization: _____ Date of Event: _____

Representative: _____ Est. Charges: _____

Christiani's Rep: _____