

# BODEGA NEGRA

355 W 16<sup>TH</sup> STREET  
NEW YORK, NY 10011

## CREDIT CARD AUTHORIZATION FORM

RESERVATION NAME: \_\_\_\_\_

# IN PARTY: \_\_\_\_\_

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

TIME: \_\_\_\_\_

I, \_\_\_\_\_, HEREBY AUTHORIZE BODEGA NEGRA TO CHARGE MY CREDIT CARD FOR THE SPECIFIED ITEMS BELOW. I UNDERSTAND THAT THIS CHARGE WILL INCLUDE 8.875% NEW YORK SALES TAX (EXCLUDING GIFT CERTIFICATES.) AT YOUR CONVENIENCE WE ARE HAPPY TO ADD A GRATUITY TO YOUR FINAL BILL. PLEASE INDICATE BY INITIALING AND CHECKING THE APPROPRIATE BOX:

18%

20%

22%

**PLEASE CHECK ALL THAT APPLY:**

ENTIRE DINNER (INCLUDING BEVERAGES)	DESSERT/ COFFEE ONLY	WINE (PLEASE SPECIFY BOTTLE & PRICE)	CHAMPAGNE (PLEASE SPECIFY BOTTLE & PRICE)	GIFT CERTIFICATE (PLEASE SPECIFY AMOUNT)	OTHER (PLEASE SPECIFY)

**SPECIAL REQUESTS:** \_\_\_\_\_

PLEASE CIRCLE ONE:

AMEX

VISA

MASTERCARD

DINERS CLUB

CARD NUMBER: \_\_\_\_\_

EXP DATE: \_\_\_\_\_

NAME OF CARD HOLDER: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

BILLING ADDRESS: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

**WHEN WOULD YOU LIKE US TO INFORM GUESTS?**

WHEN WINE/CHAMPAGNE SERVED  
CHECK)

BEFORE MEAL

AFTER MEAL (IN LIEU OF

ADDITIONAL INFORMATION: \_\_\_\_\_

**PLEASE COMPLETE FORM AND FAX WITH A PHOTOCOPY OF CREDIT CARD (FRONT/BACK)\* TO 646-625-4846**

**WE STRONGLY RECOMMEND CALLING TO CONFIRM RECEIPT OF THIS FORM 212-229-2336**