

# *Inn at Carnall Hall*

1905 ELLA'S RESTAURANT 2003



## The Inn at Carnall Hall Credit Card Authorization Form

Date of Event:

Cardholder Name:

Company Name:

Address:

Phone Number:

Fax Number:

I hereby authorize the use of my credit card for payment of: (please check)

- Deposit for banquet function to hold and guarantee room
- Method of payment for banquet function

Credit card type: (circle one)

American express

MasterCard

Visa

Discover

Credit card number: \_\_\_\_\_

Expiration date: \_\_\_\_\_

Cardholders Signature \_\_\_\_\_ Signature Date: \_\_\_\_\_

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