



## Credit Card Authorization

400 Main Street, Newport Beach, California 92661

Phone: (949) 673-4633 • Fax: (949) 673-5085

**Email to: res@Harborside-Pavilion.com**

*I hereby authorize Harborside Restaurant in Newport Beach, California to charge my credit card \$10 per person if I do not show for the banquet/event or cancel in less than twenty four (24) hours prior to the event.*

**Guest Name:** \_\_\_\_\_

**Date:** \_\_\_ / \_\_\_ / \_\_\_ **Room:** \_\_\_\_\_ **Guests:** \_\_\_\_\_

**Description of Payment:** \_\_\_\_\_

**Cardholder Name:** \_\_\_\_\_

**Cardholder Billing Address:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Business Phone:** (    ) \_\_\_\_\_ **Home Phone:** (    ) \_\_\_\_\_

### Method of Payment

**Visa**

**MasterCard**

**Amex**

**Discover**

**Credit Card Number:** \_\_\_\_\_

**Expiration:** \_\_\_\_\_ **In the Amount of: \$** \_\_\_\_\_

**Cardholder Signature:** \_\_\_\_\_

**Print:** \_\_\_\_\_

**Auth. Date:** \_\_\_\_\_

**Fax this signed form to (949) 673-5085  
or Scan and email to "res@harborside-pavilion.com"**