

# Blue River Bistro

P.O. Box 5247  
Breckenridge, CO 80424  
970.453.6974

## Credit Card Authorization Form

Please sign below to acknowledge you have approved the total catering charges, services and any unreturned or damaged rentals which you have ordered and you acknowledge that **Blue River Bistro requires a 100% deposit** prior to the delivery of these services.

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### Please complete the information below:

I \_\_\_\_\_ authorize the Blue River Bistro to charge my credit card  
(full name)  
account indicated below for \_\_\_\_\_ on or after \_\_\_\_\_. This payment is for  
(amount) (date)  
\_\_\_\_\_.  
(date of catering event)

Billing Address \_\_\_\_\_

Phone# \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Email \_\_\_\_\_

Account Type:  Visa  MasterCard  AMEX  Discover

Cardholder Name \_\_\_\_\_

Account Number \_\_\_\_\_

Expiration Date \_\_\_\_\_

CVV2 (3 digit number on back of Visa/MC, 4 digits on front of AMEX) \_\_\_\_\_

SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

I authorize the Blue River Bistro to charge the credit card indicated in this authorization form according to the terms outlined above. This payment authorization is for the goods/services described above. I certify that I am an authorized user of this credit card and that I will not dispute the payment with my credit card company; so long as the transaction corresponds to the terms indicated in this form.