

The Kitchen Restaurant
Credit Card Authorization Form

I, _____, hereby authorize The Kitchen Restaurant
to charge my credit card account in the amount not to exceed \$ _____.

- Gift Card Purchase
— OR —
 Private Party Pre-Pay

Credit Card Number: _____ Expiration Date: _____ / _____

Credit Card Billing Address:

Street: _____

City: _____ State: _____ Zip Code: _____

Telephone: () _____ - _____ email: _____

Cardholder's Signature

Date

Gift Card Info:

From: _____ To: _____

Address (if different from above): _____

Notes: _____
