



2831 Bristol Street  
Costa Mesa, CA 92626  
714-641-5952, telephone  
714-641-5955, fax  
onotria@onotria.com

Event Date: \_\_\_\_\_

Menu: \_\_\_\_\_

# of Guests: \_\_\_\_\_

LUNCH / DINNER (circle one) Time \_\_\_\_\_ to \_\_\_\_\_

MAIN DINING / AMARONE / MERITAGE ROOM (circle one)

### Credit Card Authorization Form

I authorize Onotria Restaurant in Costa Mesa, CA to bill the credit card below for the following.

Please initial next to those, which apply.

Food \_\_\_\_\_

Beverage \_\_\_\_\_

Deposit \_\_\_\_\_

Banquet Room \_\_\_\_\_

All Charges \_\_\_\_\_

Organization / Name of Group: \_\_\_\_\_

Type of Credit Card \_\_\_\_\_

Credit Card Number: \_\_\_\_\_; Exp: \_\_\_\_\_

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

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

City: \_\_\_\_\_; State: \_\_\_\_\_; Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_; Email: \_\_\_\_\_; Fax: \_\_\_\_\_

Signature of cardholder: \_\_\_\_\_

Date: \_\_\_\_\_

On-site contacts authorized to sign:

(Please Print Names)

1) \_\_\_\_\_

2) \_\_\_\_\_

\*\*Please include a legible copy, front and back of your credit card.