



CREDIT CARD - CHARGE AUTHORIZATION

By entering the information below and signing my name, I hereby authorize Gourmet Shuttle, Inc. to charge my Credit Card account (as indicated below) for those Restaurant Delivery orders that I/we place for delivery to the address below.

I/We understand that Gourmet Shuttle's driver will obtain a signature from the individual receiving the order.

Name on Credit Card: _____

Address: _____

Credit Card Holder's Phone: _____

Credit Card Number: _____ Exp: ___/___

Delivery Phone: _____

Delivery Name(s): _____

Delivery Address: _____

Special Instructions:

I/We certify that I am/we are allowed to create and authorize charges on this credit card account, and I/we agree to the above.

Signature _____

Signature _____

Date _____

Date _____

Print Name: _____

Print Name: _____

Please **print**, then send completed form by
FAX to 714-841-3464
or **mail** to 16601-k Gothard St, Huntington Beach, CA 92647