



FAO of *The Palm Court*

CREDIT CARD AUTHORISATION FORM

PLEASE FAX **THE FULLY COMPLETED AND SIGNED FORM TOGETHER WITH A COPY OF THE PHOTO ID OF THE CARDHOLDER**

For security reasons we kindly ask you not to send us copies of the card.

Tel+44 (0) 20 7290 7323 - Fax +44 (0) 20 7290 7359

I, _____ (credit card holder's full name), agree for the following charges to be taken off my credit card:

- ___ Park Lane Afternoon Tea at £33 per person
- ___ Art Deco Afternoon Tea at £39 per person

I understand that the total is: **GBP £**_____ including 20% VAT
Additional notes (if applicable)

My credit card details are as follows:

Credit Card Issuer / _____
Name of the Bank

Credit Card Number _____

Credit Card Type _____ Expiry Date _____

Billing Address (credit card holder's full postal address):

Name (as shown on credit card) _____

Address _____

City _____ Post code _____ Country _____

Tel No. _____ Fax No. _____

Email address _____

Signature _____ Date _____