

La Volpe

Ristorante Italiano

Party Deposit Request Form

I, _____, authorize La Volpe to charge
(print name)

a **non-refundable** deposit to my credit card for a party in the amount of
\$_____. (**\$10.00 per person**)

X

(Authorized Signature)

Phone: _____ - _____ - _____

Fax: _____ - _____ - _____

Credit Card Type: AMEX VISA MASTERCARD

Card Number: _____

Expiration Date: _____

Name on Card: _____

We Do Not Accept Discover and Diner's Club

AMEX, VISA, MASTERCARD WELCOMED

****Directions:** *You may return this form to us by
Fax at (631)874-2197
OR by Email to*

Roberto@LaVolpeRestaurant.NET

***Please include a photocopy of the front and back of your credit card in
your fax or email.***

www.LaVolpeRestaurant.NET