



FOR CATERING AND PRIVATE EVENTS
EMAIL: LAURA@PALOMABLANCA.NET

EVENT DAY
AND DATE:

START
TIME:

END
TIME:

LA FUENTE
EL JARDIN

VELA
CATERING

TYPE OF
EVENT:

EXPECTED
OF GUESTS:

CONTACT NAME:

EMAIL:

COMPANY
NAME:

PHONE
NUMBER:

MAILING ADDRESS:

OFF-SITE CATERING ADDRESS
OR VENUE:

AMOUNT OF
DEPOSIT:

**THE FOLLOWING AUTHORIZATION IS REQUIRED AS FORMAL CONFIRMATION
FOR THE ABOVE RESERVATION.**

I, _____ authorize Paloma Blanca to charge the
aforementioned deposit to the following credit card: MASTERCARD VISA AMEX

CARD NUMBER: _____ CVV: _____

EXPIRATION (MM/YY): _____ BILLING ZIP CODE: _____

CARD HOLDER NAME (print clearly): _____

I further understand that the charge may be posted to my account within 24 hours and
that the deposit is non-refundable.

**CANCELLATIONS: Cancellations prior to 30 days of the event shall result in the full
deposit amount being issued in restaurant credit. Cancellations within 30 days of the
event shall result in a full forfeiture of the deposit.**

Authorized Signature: _____

Date: _____

Will this also be the form of payment used for the event balance? _____

deposit

PALOMA BLANCA'S
CREDIT CARD
DEPOSIT AUTHORIZATION