

BOBBY VAN'S *Steakhouse*

Credit Card Authorization

Please fill out this form and fax it back to the proper location along with a
photocopy of the credit card.

Name:			
Phone:		Fax:	
Reservation Name:		Reservation Date:	
Time:		CVC:	
Credit Card #:		Expiration:	
Name on Credit Card:		Billing Address:	
City:	State:	Zip Code:	
Signature of Credit Card Holder Authorizing Transaction: X			Gratuity:

- ❖ **Bobby Van's Broad Street fax:** (212) 344-1099
- ❖ **Bobby Van's Park Avenue fax:** (212) 867-3350
- ❖ **Bobby Van's 54th Street fax:** (212) 207-8353
- ❖ **Bobby Van's W 50th St. fax:** (212) 957-1070
- ❖ **Bobby Van's Times Square fax:** (212) 221-7424