JUMPHIGHER – CT, LLC
MICHAEL JORDAN'S STEAKHOUSE, 23.SPORTCAFE & SOLTORO TEQUILA GRILL
CREDIT CARD AUTHORIZATION FORM
Fax-860.862.0023 telephone- 860.862.8600

Today's Date:_____ Employee Processor:_____

Guest's Name: _____

Purpose of Authorization:

- ❑ Gift Certificate
- ❑ Private Party Guarantee
- ❑ Purchase of Wine/Food for Another Guest/Table

  Name of Party _____

  Date/Time of Reservation _____
- ❑ Retail Item
- ❑ Other: _____

I authorize JumpHigher-CT, LLC (Michael Jordan Restaurants) to charge my credit card according to the details below. I guarantee full payment of the account as described.

Item Charged: _____

Amount Charged: _____

Gratuity (*if applicable) _____%

Type of Card:

- ❑ Visa
- ❑ MasterCard
- ❑ American Express
- ❑ Discover
- ❑ Diners

  Credit Card Number: ___/___/___/___/___/___/___/___/___/___/___/___/___/___/___/____

- ❑ Player Point Card Number_____

Expiration _____/_____ (month/year)

Signature of Authorized User: _____

Print Name (as it appears on card): _____

Billing Address:

_____

_____

_____

Home Phone ( ) _____Cell Phone ( ) _____Work Phone_____

Fax Number ( ) _____ Email address:_____

ATTACH A COPY OF THE FRONT AND BACK OF THE CREDIT CARD AND A COPY OF YOUR DRIVER'S LICENSE. GUESTS MUST BE 21 YEARS OF AGE OR OLDER TO DINE IN EITHER RESTAURANT UNLESS ACCOMPANIED BY A PARENT OR LEGAL GAURDIAN.

All photo copies of license and credit card documentation is destroyed after processing