

Café Central Restaurant Confirmation Agreement

Reservation or Representative Name:	
Today's Date:	Date of Reservation:
Estimated guests:	Third party contact:
Phone;	Third party contact:
Email: Third party Email:	Third party telephone:
	irs failure to return this form within 48 hrs. will result in the loss A credit card must be provided in order to confirm reservation
· · ·	uct us to charge your bill to a credit card provided by person on red on the contract will be chargedInitial.
The guest is required to provide a we may properly prepare for you	a final guest guarantee 48 hrs. prior to the event start time so that r event.
	ritten form 10 business days prior to the reservation. In the event receive written notification of cancellation, the deposit for the Initial.
Credit Card Information: You agree and authorize Café Ce final payment upon completion o	entral to charge your credit card for the event deposit and for the of the event.
Card Type: Visa MC	AMEX DISCOVERY
Name on Card	
Credit Card Number	Expiration Date
Authorized Signature	

Tax, and Gratuities:

Gratuities, sales tax and incidental charges including valet (if applicable) and equipment rental fees and entertainment do not contribute to the minimum expenditure and will be added to your final bill.

All food & beverages prices are subject to an additional Charge of 8.25% tax & 20% Gratuity **Decorations:**

Where allowed, tabletop centerpieces or any other personal decorations must meet local fire department, health department and any other governmental regulations. Nothing may be affixed to the walls of the restaurant. Please discuss any specific needs in advance.



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9	or 35 in separate tables ving:
Private rooms for lunch : 11:00 AM to 3 A deposit of \$150.00 is required to hold to	* *
Audio Visual: No Outside Audio-Visual equipment perr Package: \$150.00 LCD Projector, Screen System for remote LCD Projector \$100.00 Screen & large Flat Screen: \$50.00 We ask the Reps to provide their own HD	en, Large Flat screen and Microphone and Apple TV
affiliates and independent contractors from	e by this policy. nce of COVID 19 aurant, its partners, associates, agents, officers, directors, om any and all claims, actions, suits, or allegations for ates, emanates or in any way pertains to the event.
Host/Client (please sign)	Date
Venue Representative	Date

Should you have any questions or concerns, please don't hesitate to contact Estela Abelleyra (915) 545-2233 Ext.110 Cel: (915) 208-5812 E:mail; estela@cafecentral.com, events@cafecentral.com,