

Caffe' Delfini
 (Stanza Fieramosca)
 147, West Channel Rd
 Santa Monica (Canyon) Ca. 90402
 310-459-8823 Fax 310-459-8694

Sun - Thurs
 Private party with
 \$ 1,500
 min. consumption
 Form

**Private party with \$ 1,500 minimum consumption
 and guarantee of show or call to cancel 72 hours prior the event**

I _____, understand that in order to secure a "private party status" in the Stanza Fieramosca room, the minimum base total for the private party must not amount to less than \$ 1,500.00 + tax + 20% service charge regardless of actual consumption.

If the minimum is not met, the remainder will show as room fee on the final bill.

Type of card: MC Visa Am Ex

Credit Card No: _____ Exp date: (/ /) cvd no _____

Cardholder's name: _____

Cardholder's signature: _____

No. of people _____ Date _____ Time _____ :

Home ph. _____ - _____ Work ph. _____ - _____ Fax _____ - _____

E-mail address _____

Reason for the form:
This credit card will only be charged \$ 750.00 the day of the event in case of failing to show or providing at least 72 hours notice of cancellation.

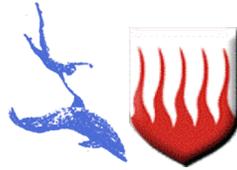
Thank you for choosing Caffe' Delfini as your place to celebrate!

Please sign, date and fax this form back to: alexercoli1@gmail.com a.s.a.p.

I have received and read the current price list and service reminder information.

Signature _____ Date _____

**Prices subject to change without notice
 November 29, 2021**



Caffe' Delfini

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310-459-8823 - Fax 310-459-8694

Friday
Private party with
\$ 2,000
min consumption
Form

Private party guarantee of show or call to cancel 72 hours prior the event

The following, authorizes Caffe' Delfini Restaurant to debit the following
credit card in the total amount of :

_____ \$ One thousand -----

\$ 1,000.00

Type of card: MC Visa Am Ex

Credit Card No: _____ Exp date: (/ /)

Cardholder's name: _____

Cardholder's signature: _____

No. of people _____ Event date _____ Time _____ :

Home ph. _____ - Cell ph. _____ - Work _____ -

E-Mail address _____

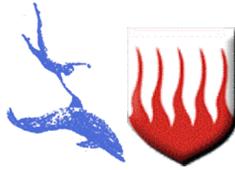
Reason for the form:

**The guest understands that his/her credit card will ONLY be charged \$1,000.00 for failing to show or calling to cancel at least 72 hours prior the day of the event
Event: Friday Private party \$ 2,000.00 Minimum consumption + tax + 20% service charge.**

I have received and read the current price list and service reminder information.
Thank you for choosing Caffe' Delfini as your place to celebrate!

Please sign, date and fax this form back to : alexercoli1@gmail.com a.s.a.p.

Signature _____ Date _____



Caffe' Delfini
 147, West Channel Rd
 Santa Monica (Canyon) Ca. 90402
 310-459-8823 - Fax 310-459-8694

Saturday
 Private party with
 \$ 2,500
 min consumption
 Form

Private party guarantee of show or call to cancel 72 hours prior the event

The following, authorizes Caffe' Delfini Restaurant to debit the following credit card for the total amount of:

\$ 1,500.00

 \$ Onethousandfivehundred

Type of card: MC Visa Am Ex

Credit Card No: _____ Exp date: (/ /) cvd no _____

Cardholder's name: _____

Cardholder's signature: _____

No. of people _____ Event date _____ Time _____ :

Home ph. _____ - _____ Cell ph. _____ - _____ Work _____ - _____

E-Mail address _____

Reason for the form:

**The guest understands that his/her credit card will ONLY be charged \$1,500.00 for failing to show or failing to cancel at least 72 hours prior the day of the event
 Event: Private party \$ 2,500 Minimum consumption + tax + 20% service charge**

I have received and read the current price list and service reminder information.

Thank you for choosing Caffe' Delfini as your place to celebrate!

Please sign, date and fax this form back to : alexercoli1@gmail.com a.s.a.p.

Signature _____ Date _____