



STONEY
NAKODA
EVENT
CENTRE

Christmas GALA

Credit Card Authorization

Name of group/guests: _____

Tables of 8: \$650 x ____

Individual seat \$81.25 x ____

all pricing is subject to 20% gratuity and 5% GST

Type of credit card:

Visa: _____ Mastercard: _____ Diners: _____ Amex: _____

Credit Card Number: _____

Expiration Date: _____

Card Holders Name: _____

Authorized Signature: _____

Card Holders Phone Number: _____

I _____, authorize the Stoney Nakoda Resort & Casino to charge the above mentioned charges to the credit card indicated on this authorization form.

Contact Name: _____ Phone Number: _____

Please attach a photocopy of the front & back of the credit card, and fax it back, along with this form to (403) 881-3495. You can email it to gala@stoneynakodaresort.com