

**CREDIT CARD PURCHASE FORM
AUTHORIZATION**

EL RANCHO
430 COLLEGE ST
TORONTO, ONTARIO
M5T 1T3
416 921 2752

Date of Reservation: _____

Name of Reservation: _____

Address: _____

Telephone Number: _____

Description of purchase: _____

I authorize El Rancho to charge my credit card for the purchase

Amount to be charged:\$ _____

Credit card number: _____

Expiry date: _____

Name on card: _____

Signature: _____

*** Please complete and email to Alexandra@elrancho.ca

Thank You
El Rancho