

Yankee Stadium One East 161st Street Bronx, NY 10451

Host 646.977.8325 Fax: 718.838.6966

CREDIT CARD AUTHORIZATION FORM

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Purpose for Authorization: Gift Certificate Advanced Payment	
Reservation Name: Reservation Date/	
Special Instructions (Birthday, Anniversary etc.)	
This is to authorize NYY STEAK to charge my account in the amount of \$ on the card specified below, including a gratuity of	e credit
PLEASE CHECK DESIRED GRATUITY	
15%18%20% or Other%	
PLEASE CIRCLE CREDIT CARD TYPE	
VISA MC AMEX DINERS CLUB JCB DISCOVER	
Credit Card #:	
Expiration Date:/ (MM/YYYY) Security Code:	
Name as it appears on the card:	
Address: Apt #	
City: State: Zip:	
Phone: ()Fax: ()	
Authorized Signature:	
Print Name	