



CONFIRMATION FORM

Thank you for your reservation! Since our space is limited, we are all directly affected when guests either do not show up for their reservation, or if a reservation is cancelled with insufficient notice.

Consequently, reservation requests must be accompanied by the signed acknowledgement form below. Please note that your reservation is not confirmed until we receive your completed form.

We look forward to welcoming you to Blanchards!

I would like to make the following reservation:

Full name: _____ Date of reservation: _____

Cell Phone: _____ Number of people in party: _____ Time: _____

I will be staying at _____ while in Anguilla.

I am submitting the following information that is to be used should our party fail to show up for the above-mentioned reservation, reduce the number of guests by more than 10%, and/or cancel within 24 hours of the time of my reservation. This transaction authorizes Blanchards Restaurant to charge my credit card a cancellation fee in the amount of \$50.00 per person. I understand that I am personally responsible for canceling this reservation by the required date. Cancellations or changes given to hotel staff cannot be guaranteed.

Please return the completed form by e-mail to bobmel@blanchardsrestaurant.com.

Please do not hesitate to call us at (264) 497-6100 with any questions. We accept Visa, Master Card and American Express.

Credit card #: _____

Exp. date _____ Security Code: _____

Name on credit card: _____

Billing address: _____

Telephone: (Home) _____ (Work) _____

Authorized signature of person named on credit card