



## Confirmation Form

Dear Sir/Madam:

Please complete this form and return it to us by email at [info@blu.bm](mailto:info@blu.bm) or by fax at (441-232-6464) within 24 hours.

Since availability is limited, the table **WILL BE RELEASED** if we do not receive your completed confirmation form within 24 hours of making your reservation. Upon receipt of this completed form, we will contact you to confirm your reservation.

I would like to reserve a table for \_\_\_ guests under the name of \_\_\_\_\_

on \_\_\_\_\_, \_\_\_\_\_, at \_\_\_\_\_ am. pm.

This transaction authorizes **Blu Bar & Grill Restaurant** to charge my credit card a no-show/late cancellation fee in the amount of **\$ 75.00 per person**. This fee applies only to the above reserved date. I am submitting the following information to be used in the event that our party fails to arrive for the above-mentioned reservation and/or fails to cancel 24 hours prior to the reservation time. Failure to cancel or show up under these terms will result in the above stated charge. I understand that without valid cancellation confirmation, to be given to me by **Blu Bar & Grill Restaurant** at the time of cancellation, I am subject to this "no show" fee.

**Optional to fill:**

Credit Card #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Exp mm/yy \_\_\_\_\_

Credit Card Type: Visa \_\_\_\_\_ MC \_\_\_\_\_ Amex \_\_\_\_\_

Billing Address: \_\_\_\_\_ Contact tel # \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

E-Signature of Authorized Cardholder only:

Please type or Sign \_\_\_\_\_

Blu Bar & Grill  
97 Middle Road  
WK06 Warwick  
(Bermuda)

Phone: 441-232-2323

Fax: 441-232-6464

E-Mail: [info@blu.bm](mailto:info@blu.bm)

**PLEASE TICK ONE**

SET MENU \_\_\_\_\_

A LA CARTE \_\_\_\_\_