



Contact Person _____
Phone _____ Fax _____
Email _____ Work _____
Billing Address _____
City _____ State _____ Zip _____

Reservation Information

Date of Reservation _____ Booked By _____ Date _____
Area(s) Reserved _____
Estimated Time of Arrival _____ Total # of Guests _____

Cost: Bar Tab _____
Additional Fees _____ Liquor Requests: _____
Gratuity _____
Total _____

URGENT PLEASE NOTE:

CHARGES FOR TABLE RESERVATIONS ARE NON-REFUNDABLE. DRESS CODE IS STRICTLY ENFORCED.

THERE WILL BE NO REFUNDS FOR ANYONE THAT IS REFUSED ENTRANCE DUE TO IMPROPER ATTIRE.

PLEASE INITIAL TO ACKNOWLEDGE YOUR UNDERSTANDING OF THIS: _____

WE **DO NOT** ALLOW PATRONS TO STAND ON FURNITURE. **YOU** WILL BE RESPONSIBLE FOR THE COST ASSOCIATED WITH ANY DAMAGE CAUSED TO FURNITURE IN YOUR SECTION.

PLEASE INITIAL TO ACKNOWLEDGE YOUR UNDERSTANDING OF THIS: _____

TAG VENTURES INC. DBA BAR7 OR ANY OF ITS EMPLOYEES ARE NOT RESPONSIBLE FOR LEFT ARTICLES OF CLOTHING OR PERSONAL ITEMS.(ie:wallets, purses, cellphones, cameras, etc..) PERSONS FROM YOUR PARTY MUST BE AT YOUR TABLE AND RESPONSIBLE FOR PERSONAL BELONGINGS.

PLEASE INITIAL TO ACKNOWLEDGE YOUR UNDERSTANDING OF THIS: _____

PLEASE BE ADVISED THAT BY LAW, WE ARE REQUIRED TO REMOVE ALL ALCOHOLIC BEVERAGES FROM THE TABLES BY 1:45AM SUNDAY THRU THURSDAY AND 2:45AM ON FRIDAY AND SATURDAY NIGHTS.

PLEASE INITIAL TO ACKNOWLEDGE YOUR UNDERSTANDING OF THIS: _____

THERE WILL BE NO SMOKING OF TOBACCO OR ANY OTHER SUBSTANCE AT ANY TIME. IF CAUGHT SMOKING INSIDE, YOUR ENTIRE PARTY WILL BE REMOVED AND NO REFUNDS WILL BE GIVEN.

PLEASE INITIAL TO ACKNOWLEDGE YOUR UNDERSTANDING OF THIS: _____

BY ENTERING THESE PREMISES, YOU HEREBY GRANT **TAG VENTURES INC. DBA BAR7** , ITS AFFILIATES AN OBLIGATION TO PHOTOGRAPH, FILM AND CAPTURE YOU AND YOUR LIKENESS, VOICE AND OTHER SOUND EFFECTS. YOU FURTHER AGREE THAT THESE IMAGES MAYBE USED IN THE PRODUCTION, EXHIBITION, DISTRIBUTION, PROMOTION, PUBLICITY AND ADVERTISING FOR THIS EVENT AND ANY FUTURE EVENTS SPONSORED BY BAR7 AND ITS AFFILIATES THROUGHOUT THE WORLD IN PERPETUITY.

PLEASE INITIAL TO ACKNOWLEDGE YOUR UNDERSTANDING OF THIS: _____

THERE WILL BE NO REFUNDS GIVEN IF YOU OR YOUR GUESTS FAIL TO COMPLY WITH THE POLICIES STATED ABOVE

Payment Information

Credit Card # _____ Exp. Date _____

The undersigned client authorizes Tag Ventures Inc. to charge the table amount to the credit card listed above and will be responsible for paying any additional charges incurred during the night, plus 20% gratuity. The client understands that the bar tab only allows bottle purchases and excludes any mixed or cocktail beverages. Additionally, the client agrees to pay for any damages to the space reserved and its contents caused by the client or guests attending the function. NOTE: A 20% ghost charge will be added to all credit card charges that comes directly from your checking account. The charge will be replaced after 3 business days.

Signature of Cardholder/Client Date

**** Please fax this form along with a **photo copy of the front and back of the above listed credit card and photo ID** to Bar7 at (202) 347-4337 to the attention of Table Reservations. Bar7 will not hold your reservation unless we receive this completed form and your credit card is approved for the entire amount.