



AUTHENTIC JAPANESE RESTAURANT

6470 Spalding Drive
Norcross, GA 30092
770.734.0398
sushimito.com

CHEF'S CHOICE OMAKASE DINNER RESERVATION FORM

Date: March 28, Wednesday, 2018, 6:30pm-8:30pm

Name:

Phone Number:

E-mail Address:

Number of Guests:

Is this a special occasion and what is the occasion?

- The room holds 10 guests in total. For additional and private seating please consult with via phone call with Manager on duty.
- We reserve the right to adjust the seating according to the number of guests in each reservation. This is done to enhance your dining experience.

Cost: \$65 excluding drinks or \$75 with our Sake Sampler.

Deposit: 50% of deposit is required (non-refundable) at the time of reservation.

Balance Due: At the day of the Dinner.

25% gratuity (25% of total including deposit before tax) will be added on your final bill.

All food and beverages subject to 6% Sales Tax.

Cancellation Policy: Due to the staffing schedule as well as time sensitive nature of the ordering/receiving fresh fish, we must implement the following cancellation policy.

- Any cancellation with prior to the dinner - 0% of the booking will be charged additionally to your card. However, the deposit will not be refunded.
- If you need a cancel your table prior to the dinner, please call Manager on Duty. In the rare case that the Restaurant cancels a dinner, your deposit will be refunded.
- This dinner Cancellation policy may be amended by Sushi Mito at any time, all rights reserved.
- This Chef's Choice Omakase Dinner Cancellation Policy is part and parcel to the reservation for the scheduled Chef's Choice Omakase Dinner located at 6470 Spalding Dr, Norcross, GA. 30092.

[] I have read and understand the cancellation policy.

Important Advisory: It is crucial for you to inform something very important to anyone who joins you at the Chef's Choice Dinner. Because our master chef carefully selects all the ingredients including from the direct shipment from Tsukiji Fish Market in Tokyo, Japan as well as sauces and stocks he uses for the dish, we are unable to accommodate any dietary restrictions or allergies. No gluten free menu or substitutions available. Please do inform your party when booking for your group about this important advisory.

[] I have read and understand the Important Advisory.

Should the aforementioned details meet with your approval, please sign below and return to us with your credit card information.

Customer Signature:

Date:



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PAYMENT INFORMATION

Please enter the numbers of party for: \$65 (excluding drinks) ___ \$75 (with Sake Sampler) ___

Deposit Total (50% non-refundable): _____

Credit card information

Number: _____ Expiration Date: ___ / ___ Security Code: _____

Name on the card _____ Billing Zip Code _____

By signing below I agreed:

- By providing my credit card information or paid 50% deposit at the restaurant for the reservation means I have read and accept our cancellation policy.
• The Restaurant reserves the right to place a temporary authorization on my credit card.
• I understand that the balance is due at the day of the Dinner, 25% gratuity (25% of total including deposit before tax) will be added to my final bill, and all food and beverages are subject to 6% Sales Tax.
• By receipt confirmation for my scheduled dinner is an acknowledgment of my understanding of the Dinner Cancellation Policy.

Card Holder Signature: _____

For any questions or concerns please contact the company at 770-734-0398 and speak to the manager on duty.



CHEF'S CHOICE OMAKASE DINNER - March 28, Wednesday, 2018, 6:30-8:30pm
Deposit Receipt

Number of party for: \$65 (excluding drinks) ___ and \$75 (with Sake Sampler) ___

Deposit total (50% non-refundable) received: _____

Your Name: _____

- By providing your credit card information or paying 50% deposit at the restaurant for the reservation you have read and accept our cancellation policy and our important advisory.
• The Restaurant reserves the right to place a temporary authorization on your credit card.
• Balance due at the day of the Dinner. 25% gratuity (25% of total including deposit before tax) will be added on your final bill. All food and beverages subject to 6% Sales Tax.
• By receipt confirmation for your scheduled dinner is an acknowledgment of your understanding of the Dinner Cancellation Policy.

Sushi Mito Manager: _____

This receipt is invalid without our manager's signature.