



Third Party Credit Card Authorization

This form is designed to allow the use of your credit card for third party billing. In order to ensure processing all fields are mandatory. Please complete in full, follow any instructions and return by fax to (604) 254-7154.

In supplying your credit card for accommodation you are acknowledging financial responsibility for incidentals including, but not limited to room damages.

Accompanying this completed document you **must include** a legible photocopy of:

- Front of credit card
- Back of credit card
- Valid ID including 1 of the following: drivers license, passport, provincial/state id

Card Holder Information:

First and last name: _____

Name on card: _____

Billing address: _____

Contact number: (____) _____

Credit card number: _____ Expiry: ____ / ____

Accepted cards include: Visa, MasterCard, American Express, Discover, Diners.

Guest Information:

First and last name: _____

Arrival date: _____

Departure date: _____

Relation to card holder: _____

This transaction is for:

Business:

Pleasure:

Both:

Upon guest check out please:

Give guest copy of folio

Fax me copy of folio to (____) _____

No folio needed

Please allow the use of my credit card for additional charges to include:

None

Flowers, gift baskets, etc. To a maximum of : _____

Food To a maximum of : _____

Non-alcoholic beverages To a maximum of : _____

Alcoholic beverages To a maximum of : _____

Date: _____ Signature of cardholder: _____