



CREDIT CARD AUTHORIZATION FORM

DATE:

Reservation Name:

Billing Address:

City/State/Zip:

Contact Phone:

Email:

I hereby authorize the following charges to be applied to my credit card:

Sub-Total: \$ Taxes: \$ 2.25% fee \$

TOTAL CHARGE \$

All credit card transactions must include a 2.25% transaction fee

Credit Card Number:

Name on Card:

Expiration: Security Code:

Signature of Card Holder:

All information is kept confidential and used only for the purposes as noted above.