



Credit Card Authorisation Form

PLEASE PHOTOCOPY FRONT AND BACK OF CREDIT CARD AND FILL IN FORM BELOW

Name of guest:	
Date of check in	
Date of check out	
Type of credit card	Bankcard/MasterCard/Visa/American Express/Diners
Credit card number	
Expiry Date	
CVV NUMBER (3 security digits on back of card) MUST BE PRESENT	
Name on Card	
Card Holders Signature	
Address for invoice to be sent	
What charges are to be charged to the credit card (Please Circle)	<p>All Charges</p> <p>Room Only Charges</p> <p>Room & Meals</p> <p>Other(please specify)</p> <p>_____</p>

***Please note there a 1% Surcharge on Mastercard /Visa and a 3% Surcharge on Amex and Diners.**