



LETTER OF AUTHORIZATION

Date: _____

GUEST INFORMATION

Guest Name: _____ Group: _____

Confirmation #: _____

CREDIT CARD INFORMATION

Name of Cardholder: _____ Phone #: _____
(please print)

Cardholder's Address: _____

Card Type: Visa MasterCard American Express

Number:

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Exp. Date: _____

Cardholder's Signature: _____

(**Please only provide your first and last four digits of your credit card. We will contact you at the telephone number listed above for the remaining digits.**)

I authorize the following:

- Room charges and shuttle passes plus taxes
- Parking and Miscellaneous Charges