



CREDIT CARD AUTHORIZATION FORM

ATTENTION: _____

SENT BY: _____

FROM THE OFFICE OF : _____

ADDRESS: _____

The following credit card information needs to be used for charges specified. By signing this document, I authorize the use of the credit card for the guest (s) and date(s) agreed upon through the Hampton Inn.

CREDIT CARD TYPE: ☐ AMEX ☐ MasterCard ☐ VISA ☐ DISCOVER ☐ DINERS ☐ JCB

CREDIT CARD NUMBER: _____ EXP _____

NAME AS IT APPEARS ON CARD: _____

AUTHORIZED SIGNATURE: _____

*****PLEASE INCLUDE A COPY OF THE FRONT AND BACK OF CREDIT CARD.*****

Guest Name (s): _____

Arrival Date: _____

Confirmation Number: _____

- Authorized Charges: ☐ Room & Tax Only
- ☐ Room & Tax & Parking
- ☐ Room & Tax & All Guests Incidentals
- ☐ Catering/Banquet & Meeting Space Charges.

Additional Notes: _____