

Attention Victoria Kipp

Confirmation#: _____



Credit Card Authorization Form

In order to protect our customers from unauthorized usage of their credit cards, if you would like us to bill charges to a credit card not physically presented to us at check in, please fill out the following and fax this form along with a legible copy of the credit card back to (614) 414-5100. **This form must be filled out in its entirety and a legible copy of the credit card provided, as well as, a photo ID of the card holder, in order for us to bill a credit card not physically presented.**

Name of Guest _____

Date of Arrival _____ Date of Departure _____

Confirmation Number _____

I authorize **ONLY** the following amount to be billed.

Amount: \$ _____

OR

I authorize the following charges to be billed.

Please check all that apply. Failure to indicate which charges, will result in a default of ALL CHARGES.

ALL CHARGES

Room & Tax **ONLY**

Phone

Meals

Valet Parking

Movies

Valet Laundry

Bar / Lounge

Other (Specify)

Banquet/ Meeting Room

Catering

Fax / Copy

TAX EXEMPT STATUS

You must attach a completed copy of your Tax Exempt Certificate(s) and a legible copy of the credit card, or we are required by law to charge tax. To be eligible for tax exempt status, the tax exempt organization must directly pay the hotel for the room.

CARD TYPE

American Express

Discover Card

Visa

Mastercard

Diners Club

Carte Blanche

CARD NUMBER _____

EXPIRATION DATE _____

PRINT CARDHOLDER NAME _____
(THIS IS THE NAME PRINTED ON THE CARD)

AUTHORIZED SIGNATURE _____

CONTACT PHONE NUMBER _____

EMAIL ADDRESS _____