



## CREDIT CARD AUTHORIZATION FORM

Please complete all areas below. Incomplete requests may be rejected. This form must be received with rooming list to ensure acceptance of the credit card to be charged.

**DO NOT EMAIL THIS FORM - FAX FORM with attachments TO: 407-206-1759**  
**ATTN: Barbara Bright, Reservations Manager**

A **CHECK** or **CREDIT CARD** is required (must accompany rooming list) to guarantee payment in order for Hotel to enter schools rooming list. If paying with school credit card a front copy of the credit card is required. **A copy of the Florida Tax Exemption form is also required.**

### HOTEL USE ONLY

Date:

Name of Card Holder:	
School Name:	
Indicated if Credit Card is to be used as <b>HOLD</b> or to be <b>CHARGED</b> for room nights	
(Please Circle One): <b>Hold Only</b> – will be provided School Check for full amount prior to arrival <b>Charge</b>	

**CARDHOLDER - Please complete the following section and sign/date below.**

Cardholder Name as it Appears on Credit Card:		
Credit Card Billing Address:		
City:	State:	Zip:
Daytime Phone:		Evening Phone:
Credit Card Number:		Expiration Date:
Credit Card Type: (Circle one)		
<b>Visa</b>	<b>MasterCard</b>	<b>Amex      Diners Club      Discover      JCB</b>
Credit Card Issuing Bank Name:		
Bank Phone Number (from back of your credit card):		
I agree to cover the following categories of charges: (Please circle):		
<b>Room &amp; Tax</b>	<b>Roll-a-Way</b>	<b>Parking      Incidentals</b>
I agree to cover the above categories of charges up to a Maximum Amount of \$_____ If using as a reservation hold, do not fill in an amount		

**Note: Charges for room/tax or parking will be charged to your credit card immediately. Any incidental charges circled above will be charged at the time of check-out.**

**INDICATE TOTAL AMOUNT TO BE CHARGED** – Full payment to be immediately charged for room or parking: \$\_\_\_\_\_

By signing below, you authorize the hotel to charge your credit card up to the “Maximum Amount” indicated above. You further acknowledge that all guest/group related charges (less Deposit) will be charged to the above credit card at the time reservations have been entered.

**Cardholder Signature required:**

**Date**