

# ISLAND SUITES

236 Lake Havasu Ave, Lake Havasu City, AZ 86403, USA P: 928-855-7333 F: 928-855-7676

## Third Party Credit Card Authorization Form

Please print and fill the form. Fax the completed form to **928-855-7676**

### CREDIT CARD INFORMATION

Name: \_\_\_\_\_ (as shown on CREDIT CARD)

Credit Card Type: VISA  MC  AMEX  DISC  OTHER

Credit Card No:

CCV:  (3 or 4 numbers on back or front of card.) Exp Date:  /

Billing Address: \_\_\_\_\_

Card Holder's Home Phone: \_\_\_\_\_

### BOOKING INFORMATION

Arrival Date: \_\_\_\_\_ Departure Date: \_\_\_\_\_ Incidentals: \_\_\_\_\_

### NAME(S) OF Party that will Check-In:

1) \_\_\_\_\_  
(Last Name) (First Name)

2) \_\_\_\_\_  
(Last Name) (First Name)

**TOTAL CHARGE =**

I hereby authorize Island Suites to charge my card in the amount of \$ \_\_\_\_\_ for payment of rooms and services for all the above persons.

(SIGNATURE OF CARD HOLDER MUST BE SAME AS SHOWN ON CARD)

**Please print the form and fill it completely. Fax this completed form to [928-855-7676](tel:928-855-7676)**

- All sections, calculations, and customer's credit card billing address must be completed in this form.
- An imprint of the front and back of the card and signature from the authorized signer must still be obtained for cards.
- All charges will only be charged once.
- Note: One night will be charged for cancellations not done within 72 hours prior to the arrival date.
- Note: The above card holder is assuming all responsibilities of any extra fees, changes, damages or costs incurred by the above named person(s) on the above dates. In the event of a charge back the above card holder will be held responsible for all costs.
- ❖ **Required documents:** Corporate cards require a company letter head, a copy of itinerary, a photocopy of cardholder's passport or driver's license, and a credit card photocopy.