



ELMHURST

## CREDIT CARD AUTHORIZATION

Date: \_\_\_\_\_

Guest(s): \_\_\_\_\_

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

Confirmation Number: \_\_\_\_\_

**This form serves as a written authorization to charge the following credit card for the listed reservation(s).**

Card Holder's Name: \_\_\_\_\_

Credit Card Number: \_\_\_\_\_ Expiration: \_\_\_\_\_

Card Holder's Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

This credit card is to be charged for:

- ☐ Room & Tax Only\*
- ☐ Incidental Deposit Only\*
- ☐ All Charges Incurred

**Please provide a photocopy of the front and back of the credit card and of a government issued I.D. For the security of the card holder, there will be no exceptions.**

\*An incidental deposit of \$50-\$250 is held on a credit card at the time of check-in to cover unexpected charges, such as room damages, outstanding tabs, missing furniture, etc. The guest must provide a credit card for this deposit if you do not authorize incidental charges.

Sign: \_\_\_\_\_ Date: \_\_\_\_\_