

**Holiday Inn Austin Midtown
CREDIT CARD AUTHORIZATION FORM**

A Photocopy of the front and back of your credit card along with a copy of your drivers license is required for this service.

I hereby authorize Holiday Inn Austin Midtown to charge my credit card account for the following function:

ORGANIZATION NAME:
REPRESENTATIVE:
ADDRESS:
CITY, STATE AND ZIP:
PHONE:
FAX:
FUNCTION DATE:

Circle Credit Card Type:

American Express	Diners	Carte Blanche
Master Card	Visa	Discover

Credit Card Number: _____ Exp.Date _____

Card Member: _____

Card Member Signature: _____ Date: _____

Card Member will be present at function _____ Yes _____ No

I authorize this card to be used as:

_____ **Advance Deposit Today** – Amount to be charged: \$ _____

_____ **10 Day Out Authorization** –

- An authorization hold for the dollar amount guaranteed to the hotel will be made on this card 10 days in advance of arrival/function date.
- If/when the amount increases, the card will be authorized for the amount of the increase.
- A final “hard” charge will be made within 72 hours of the conclusion of the function.
- *(Authorization will be released if the client opts to pay with cash or cashier's check before end of function – personal or company checks are not accepted within 10 days of function.)*
- Amount of initial authorization: \$ _____

_____ **Payment Today** – Estimated** amount of charge: \$ _____

***This is only an estimate, this amount may change based upon my final bill.*

I authorize the following charge to be placed on this credit card (check all that apply):

- _____ Room and tax (15%) Number of Rooms: _____
- _____ Restaurant and Lounge Charges
- _____ Catering/Banquet Charges
- _____ Meeting Room Rental/Audio Visual
- _____ Phone Calls
- _____ Other Incidentals – Movies, Valet, etc.

Please remit complete form to the Sales Department of Holiday Inn Austin Midtown at (512)-206-3017. **Your Credit Card will be charged for the estimated amount 3 business days prior to the beginning of your function.**

FOR ACCOUNTING USE ONLY:

Authorization Charges: _____ Estimated Charges: _____ Actual Cost: _____