

marviduai/Dusines	s/Group or Event Name:		
Reservation Confir	mation Number:		
Arrival or Event Da	ate(s):		
Credit Card Billing	Address:		
City / State / Zip / C	Country:		
Contact Phone Nun	nber:		
Contact Email Add	ress:		
Check all that apply:	e following charges to be appointed only Specific Incidentals	_	
☐ Room & Tax	•		, ,
☐ Food & Beverage		_	Other - see comments
All Incidentals	Resort Services Fee	☐ Parking	
Comments:			
Credit Card Number:			
Cardholder Name:			
Expiration Date:		Cardholder Phone #:	
Signature of Card Ho			Date: