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Credit Card Authorization To STAYBRIDGE SUITES – AUSTIN AIRPORT 1611 Airport Commerce Dr. Austin, TX 78741

Credit	Card	Aut	horiza	ation	Form

Date:						
Guest Name:						
Confirmation Number:	:	Arrival Date:				
Full Name on Credit C	ard:					
Contact Phone Number	r:					
Authorized Signature:						
Type of Credit Card:	VISA /	Master Card /	Discover /	JCB/	AMEX	
Card Number:		Expiration:				

This card is authorized for:

(CHOOSE ONE*)

- <u>Guarantee Only:</u> This card is not authorized for charges but will guarantee/hold reservation. . Card will only be charged in the event that the reservation cancels after grace period and/or No-Show.
- Room & Tax Only: This card is authorized only for standard room & tax charges during the stay. [Guest must have own Credit Card or Cash Deposit at check-in for any incidentals]
- <u>All Charges</u>: This card is authorized for ALL charges, including any incidental charges that occur during the stay (damages, phone calls, etc)

<u>Also:</u> Make a legible copy (front and back) of the credit card and a copy of the driver license or legal picture ID of the authorized signer.

<u>Note:</u> Should any information above be missing, the authorization may be voided. Please make sure you have circled an option for the authorization charges *, as well as filled out all other credit card and reservation requirements.

By completing and submitting this form, you authorize the Staybridge Austin Airport , to charge for the indicated room(s) or function. You further agree that any dispute will be resolved within 10 days of the arrival/check-in date. You understand that approval authorization may be made with the credit card company 72 hours prior to afore mentioned date.

Review form and verify that it has been completed thoroughly before submission via Fax