



600 Clubhouse Dr Page Arizona  
86040 P 928.645.5000 F 928.645.5004

### CREDIT CARD AUTHORIZATION FORM

Organization/Event: \_\_\_\_\_

Credit Card Type: [MASTERCARD] [VISA] [AMERICAN EXPRESS] [DISCOVER]

Credit Card Number: \_\_\_\_\_ Exp Date: \_\_\_\_/\_\_\_\_

Name of Card Holder: \_\_\_\_\_

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

The credit card above is authorized to be charged for the following:

- |                              |                        |
|------------------------------|------------------------|
| _____ Room & Tax             | _____ Deposit          |
| _____ Meeting Room/Set up    | _____ Breakfast/Dinner |
| _____ Banquet/Catering Event | _____ Other _____      |

Copy of Invoice Sent to:

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

Fax number: \_\_\_\_\_

Email: \_\_\_\_\_

Signature of Card Holder:

\_\_\_\_\_ Date \_\_\_\_\_

*Please attach a copy of the front and back of the credit card,  
along with a copy of card holder's ID.*