

THIRD PARTY CREDIT CARD AUTHORIZATION FORM

Dear Sir/ Madam

This form is created to allow you to have third party expenses charged to your credit card. Please provide all the information requested below to ensure immediate process of your application. Kindly sign and date the form.

Cardholder Name: _____

Credit Card Number: _____

Exp. Date : _____ CVV: _____

Card type: ☐ Visa ☐ Master ☐ Amex ☐ JCB ☐ Other

Account type : ☐ Individual (personal credit card)

☐ Corporate

Company Name: _____

Address : _____
(where statement is mailed)

City, State and Zip: _____

Phone number: _____ Fax or email: _____

I, the cardholder, hereby authorize the following charges to be applied the following guest and the following amount:

Guest Name/Group Name:

Company:

Phone Number:

Fax or email:

Number of room(s):

Confirmation Number(s):

Arrival Date:

Departure Date:

Relation to Card Holder: ☐ Relative ☐ Friend ☐ Business Associate ☐ Other

The amount was applied to the Credit Card:

☒ ☐ All Charges ☐ Room ☐ Incidental charge ☐ Other:

I certify that all information is complete and accurate. I hereby authorize The Grand Ho Tram Strip to collect payment for all charges as indicated in the Rate Information and Approved Charges section of this form by processing a charge to the credit card listed above. Charges must not exceed _____ the entire stay/event. I certify that I am the authorized signer of the credit card listed above.

Cardholder name (Printed): _____

Cardholder signature: _____ Date: _____

Accompanying this completed document you must include a legible photocopy of front and back of credit card and passport/ID of the card holder. Please complete in full and return to reservations@thegrandhotramstrip.com or to the hotel directly using the fax number (84 6)4378 8229. Thank you!