

Credit Card Charge Authorisation Form

Name of Card Holder:		
Billing Address of Card:		
Contact Telephone Number:		
Name of Guest Staying:		
Confirmation Number:		
Arrival Date:		
Departure Date:		
Amount to be charged to card:		
Type of Card:		
Card Number		
Expiry Date:		
I herby authorise Staycity Aparthotel insefor the amount detailed above.	ert site name to charge my debit / credit card	d listed above
Signature of Card Holder:		
Date:		