



Credit Card Guarantee of Payment Form:

Please complete the form in its entirety and include all requested documentation to ensure safe and rapid handling of your request. This credit card guarantee of payment form is valid for the individual group business/ reservation(s) listed below.

Today's Date:

Name:		
Address:		
City/State/Zip:		
Telephone:		
Email:		
Credit Card Number:		
Expiration Date:		CVV:
Name on Card:		
Billing Address if different than above:		
Cardholder Signature:		

Card Authorized to be Charged for:

☐ **Package Deposit**

☐ **Green/Cart Fees Only**

☐ **Accommodations**

☐ **Other** (*enter specific charge and amount*) _____

Send to:

Email: bmulcahy@reynoldslakeoconee.com

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