

CREDIT CARD AUTHORITY FORM

This completed form serves as an authorisation for Radisson Plaza Hotel Sydney to debit the Credit Card number listed below for all charges as outlined. The hotel must receive authorisation **24 hours prior** to the guests expected arrival. Due to the Merchant Bank terms and conditions, authorisation forms must be attached with **copies of both sides of the credit card and cardholder's photo identification.**

GUEST DETAILS

Guest Name:
Arrival Date:
Departure Date:
Amount to be Charged: \$
OR select one of the following options:
<input type="checkbox"/> Room Only <input type="checkbox"/> Room & Breakfast <input type="checkbox"/> Room & Meals <input type="checkbox"/> All Charges
<input type="checkbox"/> Other (please specify) _____

CREDIT CARD DETAILS

Card Type: <input type="checkbox"/> AMEX <input type="checkbox"/> DINERS <input type="checkbox"/> MASTERCARD <input type="checkbox"/> VISA <input type="checkbox"/> JCB
Credit Card Number:
Credit Card Expiry Date:
Cardholder Name:
Cardholder Signature: (For comparison to Credit Card and Identification copies)
(By signing this form I/We authorise Radisson Plaza Hotel Sydney to charge my credit card)
Date of Authority:
Cardholder Phone Number:
Copies of invoices can be posted, faxed or emailed after departure on request. Please complete below if an invoice is required and tick the applicable box for preferred method of delivery and name of person it should be marked for attention:
Name: _____
<input type="checkbox"/> Fax Number: _____
<input type="checkbox"/> Email Address: _____
<input type="checkbox"/> Postal Address: _____

Radisson Plaza Hotel Sydney

27 O'Connell Street • Sydney NSW 2000 AUSTRALIA

GPO Box 5419 • Sydney NSW 2001 AUSTRALIA

Telephone: +61 2 8214 0000 • Fax: +61 2 8214 1000

Email: res.sydpalza@radisson.com

www.radisson.com/sydneyau_plaza

Operated by Radisson Hotels Pty Ltd as agent for

Wales House Hotel Limited. (ABN 62 084 097 996)

