



AUTHORISATION TO CHARGE CREDIT CARD

| | | | |
|------|-----------------------------------|--------|--|
| TO | | FAX NO | |
| ATTN | | DATE | |
| RE | Credit Card Authorisation details | FROM | |

| | | | |
|------------------|--|---------------------|--|
| RESERVATION NAME | | CONFIRMATION NUMBER | |
|------------------|--|---------------------|--|

THANK YOU FOR ALLOWING THE HENRY JONES ART HOTEL TO PROVIDE ACCOMMODATION SERVICES FOR YOUR COLLEAGUE. PLEASE FILL IN THE FOLLOWING INFORMATION IN FULL AS DETAILED BELOW: UPON COMPLETION PLEASE RETURN TO reservations@thehenryjones.com

I, _____ AUTHORISE THE CHARGES OF
_____ EG ACCOMMODATION ONLY OR ALL CHARGES _____ TO BE CHARGED
TO THE CREDIT CARD BELOW FOR _____ GUEST NAME _____
THE CREDIT CARD DETAILS ARE AS FOLLOWS:
CREDIT CARD TYPE: _____
NAME ON CARD: _____
CREDIT CARD NUMBER: _____ EXPIRY DATE: __ / __ CVV: _____
AUTHORISING SIGNATURE: _____
PLEASE PROVIDE AN EMAIL ADDRESS IF YOU WOULD LIKE A COPY OF THE TAX INVOICE SENT TO YOU AT CHECK OUT _____
PLEASE NOTE A 1% SERVICE FEE APPLIES TO ALL TRANSACTIONS

PLEASE PHOTOCOPY THE FRONT FACE OF THE CREDIT CARD IN THIS BOX.

PLEASE PHOTOCOPY THE BACK FACE OF THE CREDIT CARD IN THIS BOX.