



6 West Oak Street, Arcadia Fl 34266

Direct No: (239)456-6555 Email: jai785llc@gmail.com Hotel No: (239)456-4666

Credit Card Authorization Form

I, _____, hereby authorize Oak Tree Hotel to charge my Company / Personal credit card for the following guest: **Guest Name:** _____

Hotel Room, Taxes, and Fees Room Service Extra Snacks, Beverages, Wine, Beer (Complimentary)

Other: _____

Credit Card Information:

Type of Card:

AMEX Discover MasterCard Visa

Cardholder Name: _____

Credit Card Number: _____ - _____ - _____ - _____

Expiration Date: _____ / _____ **Security Code (CVV):** _____

Billing Address: _____

Authorization Statement:

By signing this form, you authorize Oak Tree Hotel to charge your credit card for the amount(s) and service(s) indicated above. This authorization applies to a **single transaction only** and does **not** authorize any additional or future charges unrelated to this stay.

Extended-Extra Stay / Additional Charges Authorization (Optional):

If you wish to authorize charges for an extended/Extra stay or any additional charges using the same card, please sign below:

I authorize Oak Tree Hotel to charge my credit card for any approved extension of the guest's stay or for additional services requested.

Date: _____

Cardholder's Signature: _____