



**CREDIT CARD AUTHORIZATION FORM**

Name of Cardholder \_\_\_\_\_

Credit Card Number \_\_\_\_\_ Expiry Date \_\_\_\_\_

Type of Credit Card \_\_\_\_\_

Company Name \_\_\_\_\_

Billing Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Phone # \_\_\_\_\_

The undersigned agrees that he/she is an authorized user of the above-mentioned credit card. The cardholder authorizes **VillaAdel.es designrooms** to charge this credit card for the following charges:

**I hereby authorize the following charges to be applied to the following credit card. Check all that apply:**

- Room & Tax  Only Specific Incidentals  Gift Certificate  All Stay Charges
- Food & Beverage  All Banquet Charges  Guest Amenity  All Incidentals  Parking
- Other - see comments

**I hereby authorize the following amount be applied to the credit card (applicable sales tax and service charges may apply): EUR: \_\_\_\_\_**

**Signature of Card Holder:** \_\_\_\_\_

By submitting this form and any supporting documents, I confirm that I have read and agreed to the use of the personal information I am giving you in accordance with your Privacy Policy for Guests.

**Please fax/email this completed form to: VillaAdel.es designrooms, Hochstraße 13, 36304 Alsfeld  
FAX: +49-321-22335372  
Email: info@adeles.de**

**\*\*PLEASE EMAIL SCAN (FRONT & BACK) COPY OF CREDIT CARD\*\*  
\*\*PLEASE EMAIL PASSPORT/ ID COPY OF THE CARD HOLDER\*\***