



LETTER OF AUTHORIZATION TO CHARGE CREDIT CARD

Fax # 603-356-3463

I, (C.C. Holder) _____, authorize Adventure Suites to charge my credit card, described below, the amount agreed upon during reservation confirmation, a total of \$ _____.

Guest name: _____

Suite choice: _____

Check-in date: ____/____/____

I have attached these required documents:

1.) Photocopy of my license. 2.) Photocopy of the front and back of my credit card described below.

Mark one [X]:

I authorize my credit card for additional charges. (Ex: Remaining balance due at check in)

I do not authorize my credit card for any further charges.

Guest will settle remaining balance and supply personal credit card or \$100 cash deposit.

Credit Card Details

Name on Card: _____

Credit Card Type: Visa MasterCard Discover

Credit Card Number: _____ Exp. Date: ____/____/____

Security Code (CVC): _____

Credit card holder's contact information:

Street Address: _____ Suite/Apt. _____

Address 2 _____

City: _____ State/Province/District: _____

Zip Code: _____

Cell Phone: _____ Home Phone: _____

Email Address: _____

Signature: _____ Date: ____/____/____