



Hilton Cincinnati Netherland Plaza

Credit Card Payment Authorization Form

Please complete all areas below. Incomplete requests may be rejected. This form must be received at least 5 business days prior to the Check-In, or by specified date in Event Contract, to ensure acceptance of the credit card to be charged.

E-MAIL COMPLETED FORM TO: lisa.willer@hilton.com

Please fill in completely

Date: _____

Guest / Group Name:	
Check-In / Event Date:	
Name of Person/Group Making Reservation:	Phone:
(Hotel Use Only) Authorized Amount:	Approval Code:

CARDHOLDER - Please complete the following section and sign/date below.

Cardholder Name as it Appears on Credit Card:				
Cardholder Billing Address:				
City:	State:	Zip:		
Email address to send receipt to upon check out				
Daytime / Business Telephone:			Evening Telephone:	
Credit Card Number:		CVV2*	Expiration Date:	
Credit Card Type: (Circle one)				
<input type="checkbox"/> Visa/MasterCard	<input type="checkbox"/> American Express	<input type="checkbox"/> Discover	<input type="checkbox"/> JCB	<input type="checkbox"/> Diners Club
Credit Card Issuing Bank Name:		Bank Phone Number (from back of your credit card):		
I agree to cover the following categories of charges: (Please circle)				
All Charges	Room & Tax	Food & Beverage	Retail	Recreation
I agree to cover the above categories of charges up to a maximum amount of \$ _____.				
DIRECT BILL ACCOUNT PAYMENTS ONLY (FILLED OUT BY THE HOTEL):				
Name on Invoice/Statement _____		Date on Invoice/Statement _____		
Invoice/Statement Number _____		Authorized Amount \$ _____		

Amount to be immediately charged to credit card for room and taxes or deposit: (hotel use only): \$ _____

Final Balance Billed to Credit Card (hotel use only): \$ _____

By signing below, you authorize the hotel to charge your credit card immediately for the amount indicated above up to the "Maximum Amount: indicated above. You further acknowledge that if "all charges" has been selected, then all guest/group related charges (less Deposit) will be charged to the above card number at the time of check-out or event conclusion.

*CVV2 number is required for acceptance of CC. (Visa/MC 3 digits on signature line, Amex 4 digits at the end of the card number)

Cardholder Signature: _____

Date: _____