



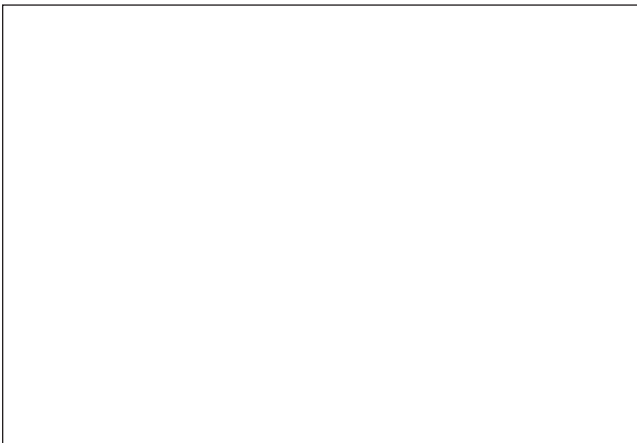
59 West 46th Street, New York, NY 10036
p 212.719.2300 • f 212.768.3477

Credit Card Authorization Form

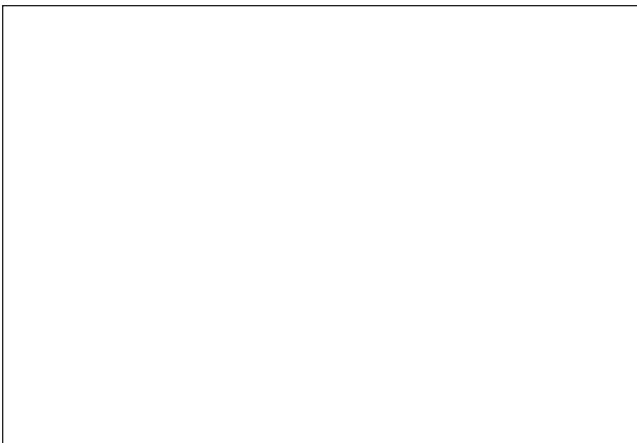
I, _____
_____ ,

hereby authorize The Hotel @ Times Square to charge the following:

- Room & Taxes
- All Charges
- Only Incidentals



Front of the Credit Card



Back of the Credit Card

Guest Information:

Name on reservation: _____

Arrival date: _____

Departure date: _____

Confirmation number: _____

Rate: _____

Credit Card Information:

Name of the company: _____

Name of the credit card holder: _____

Billing address of the credit card holder:

Credit card type: _____

Credit card number: _____

Exp: _____

CSV: _____

Phone number of the credit card holder:

Amount to be charged: \$ _____

Signature of the credit card holder:

- **Please complete this form for every reservation made**
- **Please attach picture ID of the credit card holder**
- **Please provide imprint/copy of both sides of the credit card**
- **The credit card must be signed**

After completion, please send to Chandrawattie Sunnie,
General Manager, fax # **212.768.3477** or email
sunnie@applecorehotels.com