

♪ **Border Lakes Region 2** ♪

**Sweet Adelines International
2018 Regional Convention**

Hotel Credit Card Payment Authorization Form

Housing Form Room # _____ Date _____

I, _____ authorize The Edward Hotel to charge my

(Visa, Master Card, etc.) for the following charges: ** _____

(i.e., all charges, room and tax, incidentals) for the following person(s) _____

**It is important to note what charges are to be placed on your card. Room, tax, and incidentals, (e.g. phone calls, meals, etc.) would be examples of the charges to specify, as well as the person(s) whose charges are to be placed on the card.

These charges will be incurred during the 2018 Region #2 Sweet Adelines Regional Convention over the following dates: April 26 - April 29, 2018

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

Cardholder Name as it Appears on Credit Card

Cardholder Billing Address

City, State/Province, Zip/Postal Code

Daytime /Business Telephone:

Evening Telephone:

Credit Card Number:

Expiration Date:

Credit Card Type: (Circle one) Visa/MasterCard American Express Discover JCB Diners Club