

CREDIT CARD  
**Authorization Form**

**THE ATLAS<sup>o</sup>**  
HOTEL

Thank you for your reservation. We are pleased to offer you the option to use your credit card to cover payment on behalf of the guest(s).

*Please complete the information below and fax or email it back with a copy of the front and back of the credit card and matching government issued photo ID, prior to the guest's arrival.*

Please understand this procedure has been put in place to protect you from the potential of fraudulent credit card use and that this request can only be processed once this has been provided.

Guest(s) name: \_\_\_\_\_

Confirmation #: \_\_\_\_\_

Arrival date: \_\_\_\_\_ Departure date: \_\_\_\_\_

**Please select the charges which are to be billed to the credit card:**

- Guestroom rate, taxes & fees     Telephone charges     Meals     All charges  
 Business services     Laundry/dry cleaning     Alcoholic beverages     Pull-out bed  
 Other \_\_\_\_\_

This credit card will act as a security deposit and as such will be charged if damage and other expenses other than those outlined are incurred during the stay and cannot be recovered from the guest(s) noted above.

**Cardholder Information**

Name: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Prov./State: \_\_\_\_\_

Telephone: \_\_\_\_\_

Card type: \_\_\_\_\_

Card number: \_\_\_\_\_ Expiration:

Card holder's signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Bill distribution** (Please choose preferred option):

- Mail:     Fax: \_\_\_\_\_     Email: \_\_\_\_\_

If any additional nights or charges are to be billed, a revised form must be submitted with this information outlined.

Should you have any questions or concerns, please do not hesitate to contact us. We can be reached by calling the hotel directly at 1.306.586.3443 or by emailing [guestambassador@atlashotel.com](mailto:guestambassador@atlashotel.com).

The Atlas<sup>o</sup> Hotel