

# Credit Card Authorisation Form



This form has been created to allow you to pay with your credit card for the prorated or total cost of the reservation below.

**We ask you to provide all requested information** to ensure a smooth process.

In addition, we ask you to **complete this form with your signature and the current date.**

Please send the completed form **together with a copy of your credit card (front and back)** before the date discussed, in any case before arrival, by fax to Three Little Pigs Hostel at + 49 30 2639 588 26 or by E-mail to [gruppen@three-little-pigs.de](mailto:gruppen@three-little-pigs.de).

For security reasons, we ask you to **black out the verification number on the copy of your credit card.** (Visa/MasterCard: The last 3 digits in the signature field on the back of the card.)

## Credit Card Holder Information

Name on the Credit Card			
Card Type	<input type="checkbox"/> Visa	<input type="checkbox"/> Mastercard	
Account Type	<input type="checkbox"/> private		<input type="checkbox"/> Business? Name of Company:
Credit Card Number:		Expiration date:	MM/YY
<i>Billing address</i>			
Street, Number			
Country, Postal Code, City			
Phone number		Fax	
Email-address			

## Guest Information

Guest Name	<input type="checkbox"/> Mr.	<input type="checkbox"/> Mrs.	
Company			
Phone Number		Fax	
Booking Code/Number			
Arrival		Departure	

## Rate Information and approved Costs

Rate per Guest *		Taxes *		Nights:
<input type="checkbox"/> Any Costs	<input type="checkbox"/> Room + Taxes	<input type="checkbox"/> CityTax	<input type="checkbox"/> Food & Beverage	<input type="checkbox"/> Internet Access
	<input type="checkbox"/> Washing Costs	<input type="checkbox"/> Phone Calls	<input type="checkbox"/> Other:	

*(Rate and tax amount must be filled in by the hotel or a representative)*

I certify to you that all of the above information is complete and correct.

The cost should not exceed € ..... for the entire stay.

Furthermore, I am aware that a new form has to be completed when the above mentioned stay is extended. I also certify that I am the legal owner of the aforementioned credit card.

Name of Credit Card Holder: .....  
(Block Capitals)

Signature of Credit Card Holder: ..... Date: .....