



Holiday Inn
& Suites
North Beach
Virginia Beach, VA

Credit Card Authorization Form

Cardholders Name: _____

Drivers License #: _____ State: ____ DOB: _____

Home Phone: _____ Work Phone: _____

Credit Card #: _____ Exp Date: _____

Guest/Group Name: _____

Authorization to charge (check appropriate box):

Room & Tax _____ Food & Beverage _____

Incidentals _____ Deposit _____

I authorize the Holiday Inn & Suites North Beach to bill my credit card for the charges that were incurred by the above individual/group. I understand that these charges will be put on my credit card upon my faxed authorization.

Cardholders Signature: _____ Date: _____

*Please provide a copy of the front and back of the credit card the group wishes to use.