



CREDIT CARD AUTHORIZATION

REQUIRED

(please refer to the "payment" paragraph of the original contract)

Name of person authorizing use of Credit Card: _____

Phone number of person authorizing: _____

Name of Group: _____

THE CREDIT CARD WILL BE USED TO PAY FOR: *(Choose all that apply)*

_____ Overnight Accommodations _____ Please check here if authorization includes incidentals
of Rooms _____ Rate: _____ (per night plus tax)

_____ All hotel charges in reference to the above named group *(Conference Center & Guest Rooms)*

_____ Conference Center Room Rental Fees only

_____ Any Meeting Related Expenses *(Coffee Breaks, Audio Visual Charges, Copies, etc...)*
to include 5% VA State sales tax.

_____ Guarantee of Payment only *(alternate payment method provided for actual charges)*

PLEASE CIRCLE THE TYPE OF CREDIT CARD YOU ARE AUTHORIZING FOR USE:

VISA

MASTERCARD

AMEX

DISCOVER

Credit Card #: _____

Expiration Date: _____ Security Code (3 digit code on back of card): _____

Name as it appears on the card: _____

I hereby authorize the Best Western Waynesboro Inn & Suites Conference Center to charge this credit card for the charges as outlined above.

Authorized User: (Signature) _____

(Printed Name) _____

Date: _____

*Please note that a legible copy of the front and the back sides of the credit card is required for the hotel to validate this authorization.