



COMFORT HOTEL PERTH CITY

200 HAY STREET, EAST PERTH, WA 6004 AUSTRALIA  
TEL: +618 9220 7000 ~ FAX: +618 9220 7007

A.B.N. 14 008 853 158

## CREDIT CARD AUTHORISATION FORM

I, \_\_\_\_\_ (credit card holder) authorises **Comfort Hotel Perth City** to charge my credit card for the cost incurred by \_\_\_\_\_ (name of the guest) as stipulated below – please tick appropriate box:

- All charges
- Room only charges
- Food & Beverage charges
- Other charges – please specify \_\_\_\_\_

Please advise which type of credit card we are to charge by ticking the appropriate box and place all digits including the expiry date and card security code in the space provided below:

- American Express  
Incurs 2.5% surcharge
- Visa Card  
Incurs 1.5% surcharge
- Choice Corporate Charge Card
- Diners Club  
Incurs 2.5% surcharge
- MasterCard  
Incurs 1.5% surcharge

Card Number: \_\_\_\_\_ Expiry Date: \_\_\_\_\_

Name on the Card: \_\_\_\_\_ Security Code: \_\_\_\_\_

Signature (of the card holder): \_\_\_\_\_

This authorisation is only valid for charges incurred within the dates from \_\_\_\_\_ to \_\_\_\_\_

**Please return the completed form to hotel by fax on (+61 8) 9220 7007**

Thank you for your co-operation in providing us with this information.

Please specify an address for a tax invoice to be sent:

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

City/Suburb: \_\_\_\_\_ Post Code: \_\_\_\_\_

It would also be much appreciated if you could provide us with your **best contact telephone number** \_\_\_\_\_

**Photocopy credit card  
signature side up**

**Photocopy cardholder's  
driver license photo side up**

**Please provide all information as requested. Thank you!**