



Hilton

Melbourne Rialto Place

CREDIT CARD AUTHORIZATION FORM

NAME OF GUEST: _____

COMPANY: _____

COMPANY ADDRESS: _____

DATE OF EVENT: _____

PHONE NUMBER: _____

FAX NUMBER: _____

CREDIT CARD NUMBER: _____

TYPE OF CREDIT CARD: _____

EXPIRATION DATE: _____

DEPOSIT REQUIRED: \$ _____

I, _____, authorized the Melbourne Hilton Rialto Place use of the above credit card for the dates of _____ to __ for the following charges:

<i>Room & Tax</i>		<i>Phone Calls</i>	
<i>Restaurant</i>		<i>Movies</i>	
<i>Lounge</i>		<i>Audio / Visual</i>	
<i>Food & Beverage</i>		<i>All Catering Charges</i>	
<i>Deposit</i>			

By signing below, I authorized the utilization of the above credit card for any outstanding charges for the above named person / event.

Signature of Cardholder

Date

PLEASE FAX A COPY OF THE FRONT AND BACK OF THE ACTUAL CREDIT CARD. THE SIGNATURE ON THE BACK OF THE CARD MUST MATCH THE SIGNATURE ON THIS AUTHORIZATION.