

CREDIT CARD AUTHORIZATION FORM

| l, | , hereby authorize the Hilton Virginia Beach Oceanfront | | |
|-------------------|---|--|------------------------------|
| to charge r | my credit card for the following items: | | ŭ |
| | | | |
| | Guestroom Room & Tax Charges | | Guestroom Incidental Charges |
| | Catered Food & Beverage Functions | | Meeting Room Rental |
| | Other: | | |
| | | | |
| Notes: _ | | | |
| Amount of Charge: | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| Name of | | | |
| Cardholo | | | |
| | All blanks must be completed before | hotel can pr | rocess authorization. |
| | Han for Catarad Food & Payres | no Functio | one or Croun Events |
| | Use for Catered Food & Beverag | ge Function | ons or Group Events |
| Name of | | Name of Contact: | |
| Group: | | Dates of | - |
| Name of Event: | | Event: | |
| Address | of | | |
| Group: | | | |
| Phone: | | Fax: | |
| i ilolie. | All blanks must be completed before | All blanks must be completed before hotel can process authorization. | |
| | Use for Guestrooi | n Reserva | ations |
| Name of | | Confirm | ation |
| Guest: | | Confirmation Number: | |
| Check-In | | Check-Out | |
| Date: | | Date: | _ |
| Address | of | | |
| Guest: | - | | |
| Phone: | | Fav: | |

All blanks must be completed before hotel can process authorization.