



Credit Card Authorization Form

Guest Information: Confirmation # _____

Name: _____

Arrival Date: _____

Departure Date: _____

Accommodations: _____

Rates per Night: _____

Credit Card Holder Information:

Name (as it appears on the Card): _____

Phone #: _____

Credit Card #: _____

Expiration date: _____

Charges that you wish to authorize: Please check one

- Room & Tax Only
- Room, Tax & All Incidentals
- Room, Tax & Specific Incidentals

Cardholder's Signature: _____

***Please be sure to sign & date this form and fax it back to the Blakely New York at (212)582-8332 with a legible photocopy of the front & back of the credit card you wish to use for the stay.