



University Inn and Conference Center

Credit Card Authorization

Dear Valued Guest,

Please sign and date this form and fax completed form to Reservations at 732-932-1673.

I, _____, give authorization to the Rutgers University Inn and Center, to charge the credit card listed for

- All room charges & applicable taxes
 Incidental Charges

Table with 6 columns: Name of Guest, Confirmation #, Check in, Check out, Internal Use: Date/Amt Posted, Internal Use: Initials. Contains three empty rows for data entry.

*payment will be processed according to the rates selected upon booking the reservation. Please refer to your confirmation for details.

Credit Card Information

Names as it appears on card _____

Card Type: Visa MC Amex Discover

Credit Card Number: _____ Expiration: _____

Account Type:

Individual (personal credit card) Corporate - Co Name: _____

Address: _____ Phone No.: _____

City, State, Zip: _____

I certify that the information provided is complete and accurate. I hereby authorize, Rutgers University Inn and Conference Center to collect payment for the charges as indicated above. I am aware of all hotel policies and understand that the card on file will be charged for the reservation above.

Cardholder signature: _____

Date: _____

Internal Use: _____