



## Credit Card Authorization Form - Payment on Behalf of Guest

**Card Type:**            **MasterCard**                      **VISA**                      **VISA Debit**

**Card Holder Name (as shown on card):**

**Card Number:**

**Expiry date (mm/yy):**

**CVV (3 Digit Verification Code):**

**Billing Address:**

I certify that the above information provided is valid and has sufficient funds. I authorise Neill Wycik Hotel to charge my card for applicable hotel charges for named hotel guest below. Neill Wycik to securely dispose of credit documentation.

**Hotel Guest Name:**

**Cardholder Signature:**

**Date:**

Click to submit completed form to: [hotelfrontdesk@neill-wycik.ca](mailto:hotelfrontdesk@neill-wycik.ca)