

GOLDEN KNIGHT MOTEL

Phone #: 503-665-9127

Fax#: 503-661-5387

CREDIT CARD AUTHORIZATION FORM

** IMPORTANT **

- Please include a copy of the credit card (Front & Back).
- Please include a copy of a state ID card or Driver's License.
- A fax photocopy of this authorization shall be as valid as the original.
- Guests using this authorization must be present proper photo ID upon check-in.

I, _____, give authorization to the Golden knight Motel located in Gresham, Oregon, 97030 to charge my credit card to pay for:

Check all that apply:

Room & Tax Charges Only

OR

Amount of Charges

Incidentals only

\$ _____

Room, tax and incidentals

Name as it appears on card: _____

Credit Card Number: _____

Card Type: _____ Expiration Date: _____

Billing Address for this card is: _____

City: _____ State: _____ Zip Code: _____

Telephone number at the billing address is: _____

Guest name is: _____

Reservation number: _____

Date of arrival: _____ Date of Departure: _____

Signature of Credit card holder: _____