



## Third Party Credit Card Authorization Form

(Where the card holder will not be present at the hotel)

This letter authorizes the **Atlantis The Palm** to charge the credit card for the following amounts and services provided to:

Guest Name : \_\_\_\_\_  
Invoice Nos. : \_\_\_\_\_  
Amount : \_\_\_\_\_  
Number of nights : \_\_\_\_\_

The card holder hereby, agrees to be personally liable for the full statement of charges as specified below:

All charges                       Room and Authority Fee                       Food & Beverage  
 Other: \_\_\_\_\_

Please charge the above services and amounts to the following credit card:

Amex                       Visa                       MasterCard                       Diners

Card Number: \_\_\_\_\_ Expiry Date : \_\_\_\_\_

Name that appears on the card : \_\_\_\_\_

Billing address of card : \_\_\_\_\_

Cardholder's signature : \_\_\_\_\_

**In order to validate this agreement please forward a copy of the FRONT and BACK of the credit card and a copy of a government issued ID with signature via fax (+971 4 426 0001) or email ([reservations@atlantisthepalm.com](mailto:reservations@atlantisthepalm.com)) to the attention of the Reservation Department.**

I acknowledge that this agreement is irrevocable.

Name : \_\_\_\_\_

Telephone : \_\_\_\_\_ Fax : \_\_\_\_\_

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

PLEASE NOTE: AMERICAN EXPRESS CARDS WILL BE SENT TO THE REGIONAL AMERICAN EXPRESS AUTHORISATION DEPARTMENT ([auths@americanexpress.com.bh](mailto:auths@americanexpress.com.bh)) FOR VERIFICATION.

VISA/ MASTER AND OTHER CARDS WILL BE SENT TO NETWORK INTERNATIONAL FOR VERIFICATION

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