

Credit Card Authorization

Catering	Sales	Manager:

Group Name:			
Dates:			
I,		of	
authorize Chaparral Suites	Resort Scottsdale to	use my cre	dit card for guarantee and payment of the following
charges for the group meetir	ng as noted above:		
Guarantee Room & Ta	and Payment of		Fax, Shipping, Photocopies
Room & Tax			Incidentals
Guaranteed Room & Ta	•		Local Calls
Restaurant			Long Distance Calls
Catering (Food & Bo	everage)		Golf
Maating D	2000		Deposit
Meeting Ro Charges	OOIII		Other
AV Equipn	nent		
			OVER / DINERS CLUB / JCB (Please circle one) it card with this authorization.
Signature	Date		
Credit Card Holder			
Credit Card Number			
Evniration Data			

CREDIT DEPARTMENT Telephone: (480) 949-1414, ext. 1521 Fax: (480) 949-1065