



THE CUMBERLAND



CEANA

LAVERNAZ

OCEANA HOTELS 3RD PARTY CREDIT / DEBIT CARD AUTHORISATION FORM

Dear Sir / Madam,

This form has been created in order to allow you to have third party expenses charged to your company / personal credit or debit card without you having to be present. Please provide all the information requested below to ensure prompt processing of your application. We request that you also provide a copy or scan of the front and back of the card you wish to pay with. Please ensure you sign and date the form before submission. Please fax the completed form to Oceana Hotels – Central Reservations Department – Bournemouth on +44 (0) 1202 208 620 or e-mail cr@oceanahotels.co.uk

This form must be returned 24 hours before guest arrival with copies of both sides of your card and a copy of your passport or ID with photo

****Please note company credit cards must be registered to the company address and not the individual employee's address / name.*

Cardholder Information (Required):

Company Name as it appears on the card: _____

Card Type: Visa Visa Debit Mastercard Maestro / Solo Amex

Card Number: _____ Exp. Date: _____

Company Address (INC Postcode) (Where the card is registered): _____

_____ Postcode: _____

Phone Number: _____ Fax or Alternate Number: _____

Guest Information (Required):

Guest Name: _____

Address: _____

_____ Postcode: _____

Phone Number: _____ Fax or Alternate Number: _____

Arrival Date: _____ Departure Date: _____

Confirmation Number: _____

I understand that should there be any issues with the credit or debit card being used to settle my charges, I will be responsible for all expenses incurred during my stay and agree to provide a swipe of my personal credit or debit card on check in. I will also provide a copy of photographic ID if requested by Reception upon check in. Departure date cannot be extended unless a new authorisation form is completed.

Guest Name (Please Print): _____

Guest Signature: _____ Date: _____

Rate Information and Authorised Charges (Required):

Total Room Rate: £ _____ Number of Nights: _____ Board Basis: RO BB DBB

Please Highlight Authorised Charges Below:

All Charges Room & Tax Telephone Restaurant Room Service Laundry

Other: _____

I certify that all information is complete and accurate I hereby authorise ABQ Investments UK Ltd T/A Oceana Hotels to collect payment for all charges as indicated in the rate information and approved charges section of this form by processing a charge to the credit / debit card listed above. Charges must not exceed for the entire stay / event. I understand a new form must be completed if a guest wishes to extend their stay. I certify that I am the authorised signer of the credit / debit card listed above.

Company Name / Card Holder Name: _____

Authorised Signature: _____ Date: _____

The Cumberland, The Suncliff & The Cliffeside are trading names of ABQ Investment UK LTD managed by ABQ hospitality management service Qatar.