



CREDIT CARD AUTHORIZATION AND ASSUMPTION OF LIABILITY FORM

Kindly complete, sign and send back this form to us with a clear photocopy of any government issued ID to ensure prompt processing of your application.

Name Embossed on the Credit Card : _____
Credit Card Type : Visa () or Master Card ()
Card Expiry Date : _____
Credit Card Number : _____
Last 4 Digits at the back of the card : _____

Rate Information and Approved Charges:

Name of Hotel Occupant/s : _____
: _____

Date of Arrival : _____
Date of Departure : _____
Total Number of Nights Stay : _____ Total Number of Rooms : _____

() All Charges () Rooms Only () Rooms and Restaurant / Room Service Only
() Others , please specify _____

Total Charges in Philippine Peso : _____

I certify that all information is complete and accurate. I hereby authorize, **MIRAMAR HOTEL** (Tagaytay City Resort Hotel Inc.) to collect payment for the charges I have indicated above , by processing a charge to my credit card . I also understand that a new form will have to be completed if my guests wishes to extend his / her stay beyond the dates specified above.

Cardholder's Signature Over Printed Name **Date**

TERMS AND CONDITIONS:

- 1.) For reservation to proceed, kindly accomplish this form and send 1 valid government issued ID with signature (drivers license, passport, SSS etc.....) through fax (+632) 526-18-66 or through email address reservations@miramarhotel.ph .
- 2.) Reservation will be immediately confirmed once a card approval has been obtained.
- 3.) **MIRAMAR HOTEL** has the right to charge a fee equivalent to **“one night room rate “ for NO SHOW and for late cancellation made less than 24 hours prior to arrival date.**