

# CREDIT CARD AUTHORISATION

Do you or your guests want an easy way of checking out and want to pay by credit card in advance? All we need to make this happen seamlessly and securely are the following details:

I hereby confirm that I will be responsible for the hotel costs.

## BOOKING INFORMATION

Guest name/  
guests of company: \_\_\_\_\_ Reservation number: \_\_\_\_\_

Arrival date: \_\_\_\_\_ Departure date: \_\_\_\_\_

The following costs will be covered.

- |  |   |
|--|---|
| <input type="checkbox"/> All costs                   | <input type="checkbox"/> Accommodation only |
| <input type="checkbox"/> Accommodation and breakfast | <input type="checkbox"/> Other: _____       |

## CREDIT CARD INFORMATION

- |                               |                                     |   |
|-------------------------------|-------------------------------------|---|
| <input type="checkbox"/> Visa | <input type="checkbox"/> Mastercard | <input type="checkbox"/> American Express |
|-------------------------------|-------------------------------------|---|

Name on card: \_\_\_\_\_

Credit card number: \_\_\_\_\_ Expiry date: \_\_\_\_\_

## COMPANY INFORMATION:

## BILLING ADDRESS:

Company: \_\_\_\_\_

Contact: \_\_\_\_\_

Address: \_\_\_\_\_

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

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

Email: \_\_\_\_\_

I hereby confirm that the above information is correct. By signing this, I authorise Scandic Berlin Kurfürstendamm GmbH to charge the credit card as indicated above. I accept the General Terms and Conditions.

\_\_\_\_\_  
(Stamp) Signature

\_\_\_\_\_  
Date

Please send us the completed cost acceptance form by email to [reservation.kurfuerstendamm@scandichotels.com](mailto:reservation.kurfuerstendamm@scandichotels.com) or by fax to +49 (0) 30 2183949.