



Credit Card Authorisation Form

Please fill out the information requested below and return to us within 48hrs to secure your booking.

Guest Details:

Guest Name: _____
Guest Phone #: _____
Arrival Date: _____
Departure Date: _____
Room Type: _____
Room Rate: _____
Email Address: _____

I, _____ authorise the Broadwater Resort to charge the following credit card for the above mentioned stay;

CREDIT CARD # : _____
EXPIRY DATE : _____
NAME OF CARDHOLDER: _____

Please charge this credit card with the following charges (circle the one that applies):

ALL CHARGES / INCIDENTALS ONLY / ROOM ONLY / RESTAURANT MEALS

***Please note, a 10% administration fee will be added for all restaurant charges.*

Details for Restaurant Chargeback (if selected) –

Meal Limits Apply: YES / NO (if yes, please specify below)

Breakfast: _____ Lunch: _____ Dinner: _____ Per Day: _____

Alcohol Permitted: YES / NO

A card surcharge of 1.1% (Visa, Master) or 2.5% (Amex) applies to all transactions.

Please note that the guest will need to provide a credit card or cash bond upon arrival if this authorisation does not cover all charges.

Reception hours are 8am – 6pm Monday to Friday & 9am-5pm Sundays & Public Holidays.
Please advise if the guest is arriving after hours to arrange a late check in.
We require the guest's mobile phone number to send late arrival details.

Email address details for invoice:

By signing below, you are agreeing to accept all charges noted above to be charged to the nominated credit card. You are also confirming that you are authorised to allow charges to be made against this credit card.

Signature of Card Holder _____ Contact #: _____