



Credit Card Authorisation Form

Please fill out the information requested below and return to us 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 / INCIDENTAL CHARGES ONLY / ROOM ONLY

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.

A small card surcharge will be applicable to all electronic transactions. These surcharges are: 1.1% for Visa and Mastercard payments, and 2.5% for Amex and UnionPay payments.

Reception hours are 8am – 5pm 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 for tax 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 #: _____