CONRAD
TOKYO

Conrad Tokyo

Credit Card Payment Authorization Form

Please complete all areas below. Incomplete requests may be rejected. This form must be received at least 5 business days prior to the Check-In, or by specified date in Event Contract, to ensure acceptance of the credit card to be charged.

PLEASE CALL HOTEL directly to notify the Credit Card Number   **TEL   81- 3- 6388 -8000**

HOTEL USE ONLY: **Date:** _____

Authorized Amount:	Approval Code:	Date:

CARDHOLDER - Please complete the following section and sign/date below.

Guest / Group Name:				
Check-In / Event Date:				
Name of Person/Group Making Reservation:		Phone:		
Cardholder Name as it Appears on Credit Card:				
Cardholder Billing Address:				
City:	State:		Zip:	
Daytime /Business Telephone:		Evening Telephone:		
Credit Card Type: (Circle one) Visa/MasterCard	American Express	Toyota Card	JCB	Diners Club
Expiration Date:				
Credit Card Issuing Bank Name:	Bank Phone Number (from back of your credit card):			
I agree to cover the following categories of charges: (Please circle) All Charges	Room & Tax	Food & Beverage	Retail	Recreation
I agree to cover the above categories of charges up to a Maximum Amount of ¥ _____				
DIRECT BILL ACCOUNT PAYMENTS ONLY: (For direct billing customers paying by credit card) Name on Invoice/Statement _____ Date on Invoice/Statement _____ Invoice/Statement Number _____ Authorized Amount ¥ _____				

Note: Charges for room and tax, group deposits or direct bill account payments will be charged to your credit card immediately. Any incidental charges circled above will be charged at the time of check-out.

Amount to be immediately charged to credit card for room and taxes or deposit: ¥ _____
Final Balance Billed to Credit Card (hotel use only): ¥ _____

By signing below, you authorize the hotel to charge your credit card immediately for the amount indicated above up to the "Maximum Amount" indicated above. You further acknowledge that if "all charges" has been selected, then all guest/group related charges (less Deposit) will be charged at the time of check-out or event conclusion.

Cardholder Signature: _____   Date: _____