



This form has been created in order to allow you to have expenses charged to your credit/debit card. **I understand that the hotel is not required to accept this form and the client/guest should check with the hotel to ensure they accept third party transactions.** Please provide all of the required information below to ensure prompt processing of your application. We ask you to please sign and date the form before submission. Please email the completed form to your appropriate hotel contact.

FOR SECURITY reasons, Marriott International conforms to all Payment Card Industry (PCI) standards.

CARDHOLDER INFORMATION – Required

Name as it appears on the credit/debit card: _____
Card Type: Visa MC Amex Diners/CB Discover JCB
Account Type: Individual Debit Credit Corporate - Company Name: _____
Issuing Bank: _____ Phone: _____
Account Number: _____ Exp. Date: _____ CVV: _____
Address (statement): _____
City, State, Zip: _____
Phone Number: _____ Fax or Alternate Number: _____
Relation to Client: Self Business Associate Sponsor Other _____

CLIENT / GROUP INFORMATION – Required

Company/Group/Event Name: _____
Address: _____
City, State, Zip: _____
Phone Number: _____ Fax or Alternate Number: _____
Group Contact Name: _____
Event Date(s): _____

APPROVED CHARGES AND RATE INFORMATION – Required

(Select the appropriate checkboxes.)

All Catering Charges All Ballroom Rental Charges All Guestroom Charges Guestroom Rate & Taxes
 HS Internet Access Restaurant Room Service Telephone (Local)
 Laundry Valet Parking Other _____

Room Rate:* _____ Taxes:* _____ Total Daily Rate:* _____ Number of Nights: _____

*(Rate and tax amount must be provided by a hotel representative in order to complete this form.)

I certify that all information is complete and accurate. I hereby authorize The Westin Richmond to collect payment for all charges as indicated in the Approved Charges and Rate Information section of this form by processing a charge to the credit/debit card listed above. I understand that should there be any issues with the credit/debit card being used to settle my charges, I will be responsible for all expenses incurred. Charges must not exceed \$_____ for the entire stay/event. I certify I am the authorized signer of the credit/debit card listed above.

Cardholder Name: (Printed) _____

Cardholder Signature: _____ Date: _____

Please do not send a photocopy of the front or back of your credit card.