CREDIT CARD AUTHORIZATION FORM

Hotel: FL - Hyatt Regency Miami

Guest Name(s):

Guest Reservation Confirmation Number:

Function Name (if applicable):

Guest Arrival Date(s):

Name of Business (if applicable):

Credit Card Billing Address:

City / State / Zip / Country

Guest Phone Number:

I hereby authorize the following charges to be applied to the following credit card.
Check all that apply:

- ☐ Room & Tax
- ☐ Food & Beverage
- ☐ All Incidentals
- ☐ Only Specific Incidentals
- ☐ All Banquet Charges
- ☐ Resort Services Fee
- ☐ Other - see comments
- ☐ Gift Certificate
- ☐ Guest Amenity
- ☐ Parking

I hereby authorize the following amount be applied to the credit card:

Comments:

Credit Card Number:

Expiration Date:

Name on Card:

☐ Credit Card

☐ Debit Card

Signature of Card Holder: _____ Current Date 8/26/22

Please fax this completed form to:

Hotel Fax #: **+1 305 381 9184**

For a list of all hotels and their contact information, please visit: http://www.hyatt.com/hyatt/site-map.jsp

All information is kept confidential and used only for the purposes as noted above.

PARK HYATT™ ANdAZ™ GRAND HYATT HOTELS™ HYATT REGENCY HOTELS™