



Credit Card Authorization Form

With my signature below, I hereby authorize GradCity or Shores of Panama Resort to charge the below credit card **if** there are damages to the traveler's room or damages by the traveler to the Shores of Panama property.

This form is required for resort check-in. This form must be printed and submitted to GradCity onsite staff at resort check-in.

CARDHOLDER INFORMATION

Name as it appears on the credit card:		
Card type: <input type="checkbox"/> Visa <input type="checkbox"/> Mastercard <input type="checkbox"/> Amex <input type="checkbox"/> Discover		
Credit Card Number:	Expiration Date:	Security Code:
Billing Address:	City, State & Zip:	
Phone Number:		

GUEST INFORMATION

Guest Name: _____ Phone Number: _____

Arrival Date: _____ Departure Date: _____

I certify that all the above information is complete and accurate. I hereby authorize GradCity or Shores of Panama Resort to collect payment if any damages are done by the above guest/traveler. I certify that I am the authorized signer of the credit card listed above.

Cardholder Name (printed): _____

Cardholder Signature: _____ Date: _____