## HYATT REGENCY DENVER at COLORADO CONVENTION CENTER CREDIT CARD AUTHORIZATION FORM

Individual / Reservation / Group or Event Name:

Booking Number:

C/CS Manager:

Arrival / Event Dates:

Credit Card Billing Address:

City / State / Zip / Country:

Contact Phone #: E-mail:

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

Room & Tax	Only Specific Incidentals	Gift Certificate
Food & Beverage	All Banquet Charges	Guest Amenity
All Incidentals	Resort Services Fee	Parking

Other (Please specify)

I authorize all specified charges to be settled through the following Credit Card. I understand that the above estimate may vary considerably based on final attendance confirmation or changes to the event.

The credit card listed below may be billed for the estimated charges TEN (10) days prior to the event / reservation date.

Credit Card #:

Expiration Date:

Name on Card:

Phone #:

Signature of Card Holder:

Date:

## Please fax this completed form to the Hotel Fax #: 303-486-4314

Provided information will remain confidential and used only for the purposes as noted in this document. For a list of all hotels visit: http://www.hyatt.com/hyatt/site-mai.jsp