



Credit Card Authorization Form

This form has been created in order to allow you to have third party expenses charged to your credit card. Please provide all the information requested 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 along with a copy of your driver's license to The Grey Swan Inn Bed and Breakfast, 615 S Main Street, Blackstone, VA 23824

Cardholder Information:

Name as it appears on the credit card: _____

Card type: ☐ Visa ☐ MC ☐ Amex ☐ Discover

Account Type: ☐ Individual (personal credit card)

☐ Corporate – Company Name: _____

Account Number: _____ Exp. Date: _____

Address: _____
(where statement is mailed)

Phone number: _____ Alternate number: _____

Guest Information:

Guest Name: _____

Phone number: _____ Alternative number _____

Arrival date: _____ Departure date: _____

Relation to cardholder: ☐ Relative; ☐ Friend; ☐ Business Associate; ☐ Other: _____

Rate Information and Approved Charges:

Room requested:

Room rate _____ Taxes: _____ Total daily rate: _____ Number of nights: _____

☐ All Charges ☐ Room & Tax ☐ Add-On Amenities

☐ Other: 1. Guest will transfer to a lower rated room if it becomes available
2. Totals will be adjusted if more or less days are required

I certify that all information is complete and accurate. I hereby authorize The Grey Swan Inn Bed and Breakfast to collect payment for all charges as indicated in the Rate Information of this form by processing charges to the credit card listed above. Charges must not exceed _____ for the entire stay/event.

Cancellation Policy: With less than 48 hour notice, there will be a cancellation charge equal to one night's stay and any add-on amenities (specifically, flowers and specialty cake) will be charged. Should the Inn be able to re-engage the reserved room, we will refund the full amount of the cancellation charge less the add-on amenities.

I understand that an additional written authorization via email may be required if guests wish to extend their stay. I certify that I am the authorized signer of the credit card listed above.

Cardholder name: (printed) _____

Cardholder signature: _____