

SILVERTON

Casino • Hotel • Las Vegas

WWW.SILVERTONCASINO.COM

SILVERTON HOTEL CREDIT CARD AUTHORIZATION FORM

RESERVATIONS: 866-946-4373 OR 702-263-7777

FAX#: 702-914-7405

By completing this form, I authorize Silverton Casino, LLC., to use this credit card to charge the following:

I AM AUTHORIZING THE FOLLOWING CHARGES ON MY CREDIT CARD BELOW:

*******PLEASE CHECK THE APPLICABLE BOX*******

RATES QUOTED: _____

GUEST/GROUP NAME: _____ CHECK-IN/EVENT DATE: _____

ROOM AND TAX ONLY (12% TAX) (NO DEPOSIT AUTHORIZED)

THE ARRIVING GUEST, USING THEIR OWN CREDIT CARD, MUST PAY THE DEPOSIT.

ROOM/TAX/RESORT FEE AND DEPOSIT AUTHORIZED TO BE CHARGED FOR _____ NIGHTS.
(TAX 12%) (DEPOSIT \$100 FOR ALL ROOM TYPES)

AUTHORIZED TO "BILL ALL CHARGES TO CREDIT CARD" FOR _____ NIGHTS. INCLUDES: (BUT NOT LIMITED TO ROOM/TAX/RESORT FEE/DEPOSIT/FOOD/BEVERAGE/TELEPHONE.
MAXIMUM AMOUNT OF \$ _____.

ROOM AND TAX ONLY

RESORT FEE OF \$12.99 PLUS TAX PER NIGHT

HOTEL DEPOSIT ONLY

CREDIT CARD TYPE: (CIRCLE ONE)

VISA

MASTERCARD

AMERICAN EXPRESS

DISCOVER

JCB

DINERS CLUB

MY CREDIT CARD NUMBER IS: _____ - _____ - _____ - _____

CVV NO. _____ EXPIRATION DATE: _____ / _____ / _____

PRINTED NAME: _____
(Name as it appears on the card)

BILLING ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

DAYTIME PHONE: _____ EVENING PHONE: _____

Note: Charges for room and tax, group deposits or direct bill payments will be charged to your credit card immediately. **Any incidental charges checked above will be charged at the time of Check-Out.**

Amount to be immediately charged to credit card for room and taxes or deposit: \$ _____

Final Balance Billed to the Credit Card (hotel use only): \$ _____

By signing the below, you authorize the hotel to charge your credit card immediately for the amount indicated above up to the "Maximum Amount" listed above. You further acknowledge that if "all charges" has been selected, then all guest/group related charges (less Deposit) will be charged to the above card number at the time of Check-Out or event conclusion.

Cardholder Signature: _____ Date: _____