



Sandcastle
VACATION RENTAL

Credit Card Authorization Form

If you wish to use a credit card for this rental, please provide the following information:

The Keel

The DeerView

Name on Credit card:

Credit card billing address:

City _____ State _____ Zip Code _____

Home Phone: _____

Cell Phone: _____

Work Phone: _____

E-mail Address: _____

Type of Credit Card: Master Card Visa

Credit Card Number _____

Exp date _____ CV2 Number _____

Number of Days: _____ Total Amount to put on card: _____

I hereby give permission to charge my credit card for the amounts above. By Signing Below, I agree to all terms and conditions of this agreement.

Signature _____ Date _____