

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

Individual / Reservation / Group or Event Name:

Arrival / Event Dates:

Credit Card Billing Address:

City / State / Zip / Country:

Contact Phone: _____

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

- | | | |
|--|--|---|
| <input type="checkbox"/> Room & Tax | <input type="checkbox"/> Only Specific Incidentals | <input type="checkbox"/> Gift Certificate |
| <input type="checkbox"/> Food & Beverage | <input type="checkbox"/> All Banquet Charges | <input type="checkbox"/> Guest Amenity |
| <input type="checkbox"/> All Incidentals | <input type="checkbox"/> Resort Services Fee | <input type="checkbox"/> 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>