PLEASE COMPLETE THE FOLLOWING DETAILS TO GUARANTEE AUTHORISATION TO A NOMINATED CREDIT CARD:

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hereby give Hind Man	agement (NZ) Ltd ("Hind") authorit	y to use my credit card for the follo	wing services*:
Booking Name:			
Arrival Date:		Reference: #	
Departure Date:		Rate/Package:	
PLEASE TICK ROOM		PLEASE TICK APPLICAB	I F CHARGES:
Luxe King	Conference Room	Room Only	Package Rate
Luxe Twin		Room and Breakfast	 All Charges
Luxe1Bed Apartment		O Room and Meals	Guarantee Only*
Executive Apartment		Conference Charges	

PLEASE COMPLETE CREDIT CARD DETAILS:

Note: A clear photocopy/scan of the Front and Back of the Credit Card and photo ID such as a Drivers License or Passport is required for security purposes and as per Bank policies for third party charges and authorisations. **A Credit Card Fee of 2% will apply to all transactions. The credit card will be charged on the date of departure unless requested otherwise.**

Card Type:	Expiry Date:
Card Number:	Name on Card:
Signed:	Date:

COPY OF THE RECEIPT TO BE EMAILED TO:

Email Address:

*The Card Holder authorises Hind (legal owner of Sudima Christchurch City) to debit the Card Holder's credit card for all costs associated with the booking. Such costs include (without limitation), use of the room, room rental, meals, other hotel services, cost of damage to or loss of Hind's property, and any other loss incurred (whatsoever) by Hind as a result of the booking (the "Costs"). The Card Holder further guarantees payment to Hind of the Costs. The Card Holder's authorisations and guarantees are valid whether or not the Card Holder and the guest are the same person.

SUDIMA CHRISTCHURCH CITY