



CREDIT CARD AUTHORISATION

To: _____ From: Maree Walsh-Harris
Fax: _____ Pages: _____
Email: _____ Date: _____

In reference to reservation number: _____

Arrival: _____ Departure: _____ 10AM

In the name of:

Please provide the following payment details and return to Mollymook Seascape Motel.

Email: admin@mollymookseascapemotel.com.au **OR** Fax: 02 44 55 3604

I _____ hereby authorise Mollymook Seascape Motel 22-24 Princes Hwy Mollymook NSW, Australia 2539 to charge the following credit card for accommodation and expenses related to my stay. I have read and understand the full Terms and Conditions of the property these are available on our website:- <http://www.mollymookseascapemotel.com.au/TermsandConditions.pdf>:

Credit Card Type VISA MCARD DINERS AMEX

Full Name on Card: _____

Card No.																				
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Expiry Date: _____

CCV Number _____

Card Holders Signature: _____

- Total accommodation amount: \$ _____
- All charges relating to this booking: \$ _____
- Other please specify \$ _____

PLEASE NOTE YOU MUST ALSO SEND THROUGH A PHOTOCOPY OF YOUR CREDIT CARD, BOTH FRONT & BACK ALONG WITH IDENTIFICATION SUCH AS A DRIVERS LICENCE, OR ACCEPTABLE PHOTO ID.

YOUR BOOKING WILL NOT BE CONFIRMED UNTIL WE HAVE RECEIVED THE RELEVANT PAPER WORK.