## Chargeback Authority Form

Guest Information			
Company (if applicable)			
Name of Guest			
Arrival Date			
Departure Date			
Confirmation Number			

Method of Payment					
Credit Card Type	🗌 Visa	M/Card		Diners	ЈСВ
Cardholder's Name					
Mobile Contact Number					
Last 4 digits of Credit Card		Last four	digits of c	card only	
Credit Card Expiry Date					
Cardholder's Signature					
<ul> <li>For the chargeback form to be accepted the following conditions must be met. In the event these cannot be met the guest travelling will be required to pay for their own expenses</li> <li>Chargeback forms will not be accepted within 48 hours of guest arrival date</li> <li>First 12 digits of the credit card are to be phoned/emailed through to</li> </ul>					

reservations on 9648 2777 or reservations.melfs@ihg.com

## Chargeback Options

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Room Only	All Charges
Room and Breakfast	🗌 Valet Parking
Room and Meals	🗌 Internet
Non-alcoholic Beverages	Dry Cleaning/Laundry
Alcoholic Beverages	Other (Please specify):

## Invoice Information

Name	
Email	