

Ashgrove Lane Property LTD
(Quality Inn Southampton)
100 North Rankin St. Southampton
Ont. N0H2L0

Authorization Agreement

Company Name _____
I hereby authorize Quality Inn Southampton to use my credit card for the
charge of me and/or my co-workers staying at hotel for length of their stay.
 Room and Taxes Incidentals

I would like my credit card to be used
 one time only for _____

Name Of the guest and phone number: _____

OR

kept on file for future reservations for _____

Name Of the guest and phone number: _____

Credit Card Information

Credit Card Number _____
Expiry Date _____ CVC _____
Name On credit card _____

Requirements
 a legible photocopy of the front and back of the credit card to be used must
be attached or faxed with this authorization form. If there is no photocopy we
cannot process the credit card.

Signature

Authorize Signature _____

Date _____