



Credit Card Authorization Form

I, _____, hereby authorize the Paramount Hotel to charge the following charges to my credit card. *I understand a credit card must be provided to the Hotel for incidental charges upon check-in.*

- | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Room & Tax Only
<input type="checkbox"/> Room, Tax & Phone Calls
<input type="checkbox"/> Room, Tax & Parking
<input type="checkbox"/> All Charges | <input type="checkbox"/> Catering Charges
<input type="checkbox"/> Meeting Room Charges
<input type="checkbox"/> Other (Please Specify)
_____ |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------|

The credit card is a: Corporate card Personal card

Card type: Visa/MC American Express
 Discover Other (please specify) _____

Please call the hotel directly with the full credit card #

Last Four Digits of Credit Card Number ____ ____ ____ ____ Expires ____/____

Name shown on card _____

Authorizing signature _____ Date ____/____/____

Cardholder's billing address _____

Cardholder's telephone number _____

Cardholder's email address _____@_____

Name(s) of guest(s) authorized to charge to credit card:

Name(s)	Dates of stay	Confirmation #
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

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