

CREDIT CARD FAX AUTHORIZATION (RETURN TO FAX # 865-908-4995)

I, _____, give authorization to Aunt Bug's Acorn Cabin Rentals LLC, located at 3121 Veterans Blvd, Pigeon Forge, TN 37863 to charge my credit card to pay for:

(Circle all that are applicable)

Room & Tax Charges Only

Incidentals Only or **Amount of Charge**

Room and Incidentals \$ _____

Security Deposit

Group Deposit

Pet Deposit

Name as it appears on the credit card: _____

My credit card number is: _____

Expiration Date: _____ CVS security code (last 3 digits on signature line): _____

The billing address for the credit card is: _____

City, State, & Zip _____

The telephone at the billing address is: _____

Guest Name: _____

Authorized Alternative Guest(s) Name: _____

Property Name, Number/Reservation Number: _____

Date of Arrival: _____ Date of Departure: _____

Please include a copy of the credit card (front and back), and a copy of a state ID card or driver's license.

A Fax photocopy of this authorization shall be as valid as the original.

Guest using this authorization must present proper photo ID upon check-in.

Signature of credit card holder: _____

Date: _____