



CORFU HOLIDAY
PALACE

CREDIT CARD AUTHORIZATION FORM

Credit card Type & Number	
Name of Credit Card Holder	
Type of Credit card (Visa or Master Card)	
Credit Card Number	
Verification number/CVV (3 digit number at the back of the credit card)	
Expiry Date	

I hereby authorize Corfu Holiday Palace to charge my credit card

Authorized by (full Name):

Date:

Guest Information	
Guest name	
No of Rooms	
Number of Nights	
Arrival Date	
Departure Date	
Daily Accommodation Charge	
Deposit to be charged to my credit card	
