

HOTEL SOL & LUNA

Info@hotelsolyluna.com

CREDIT CARD PAYMENT AUTHORIZATION FORM

*We accept MasterCard, Visa and American Express

Name: _____ Passport No. _____

Address: _____

Country: _____ Telephone: _____

Card No: _____ Visa () MasterCard () American Express ()

Expiration date: _____ Security Code (on back of card): _____

Amount (US\$): _____

FAX FORM TO: (51-84) 201184 and confirm by E-mail: info@hotelsolyluna.com

As the owner of the above credit card, I agree to having credit charges, as indicated above, applied to my credit or debit card account by PETIT-POIS S.A.C. (Hotel Sol & Luna).

I agree to comply with the reservation, payment & cancellation policies of Petit-Pois S.A.C. I also understand that my credit card will automatically be charged 30 days prior to my arrival date.

Please fax us a photocopy of your passport along with this form.

As a sign of conformity, the card owner will sign this document on the date of

Cardholder's signature: _____

Reservation code: _____

Arrival date: _____