



Credit Card Authorization Form

This form is used to allow you to have third party expenses charged to your credit card. Please take a moment to complete the form below and return it to us. Please fax the completed form along with a copy of your identification (driver's license or government issued identification) to 509-481-6051. If you have any questions, please call 877-871-6772.

Cardholder Information

Cardholder Name: _____

Mailing Address: _____ City _____ State _____ Zip _____

Phone Number: _____ Fax Number: _____

Guest Information

Guest Name: _____

Phone Number: (_____) _____

Confirmation Number: _____ Arrival Date: _____ Departure Date: _____

Room Rate: _____ Number of Nights: _____

Approved Charges or Approved Dollar Amount: \$ _____

- | | | | |
|---|--------------------------------------|---|---------------------------------------|
| <input type="checkbox"/> Room & Fees Only | <input type="checkbox"/> All Charges | <input type="checkbox"/> Incidental Deposit (required for every stay) | |
| <input type="checkbox"/> Food & Beverage | <input type="checkbox"/> Telephone | <input type="checkbox"/> Spa | <input type="checkbox"/> Room Service |
| <input type="checkbox"/> Movies | <input type="checkbox"/> Lounge/Bar | <input type="checkbox"/> Gift Shop | <input type="checkbox"/> Misc. |

I hereby authorize Northern Quest Resort & Casino to collect payment for all charges as indicated in the Approved Charges section of the form by processing a charge to the credit card ending (last 4 digits) _____. I understand that new form will have to be completed if guest wished to extend his/her stay. I certify I am the authorized signer of the credit card listed above.

Please Note: An alternate form of payment will be required at check-in if the above paperwork is not complete and/or legible. The Front Desk does not accept personal and/or business checks upon arrival.

****The information below will be discarded once the payment is processed****

Credit Card Type: Visa Master Card Discover American Express

Credit Card Number: _____ Exp. Date: ____/____/____