

CREDIT CARD AUTHORIZATION FORM

Individual/Business/Group Name:	
Account Number:	
Event Date (if applicable):	
Credit Card Billing Address:	
City / State / Zip:	
Contact Phone Number:	
Contact Email Address:	
I hereby authorize Hershey Entertainment & Resorts Company ("HE&R") to apply the following amount(s) incurred and/or due and owing in connection with the agreement referenced in the Comments box below ("Agreement") to the credit card provided on this form ("Credit Card"): Deposit/Other Amount: \$ Or I hereby authorize the following charges to be applied to the following credit card. Check all that apply (applicable sales tax and service charges may apply):	
☐ Guest Room(s) & Tax ☐ Food & Beverage ☐ Spa Services ☐ Country Club ☐ Guest Room Incidentals ☐ HSY Destination Services ☐ Other (list in comments)	
Comments:	
Credit Card Type: Visa MasterCard American Express Discover	
Credit Card Number:	Leave Blank - Please Call With Credit Card Number
Name on Card:	
Expiration Date:	
Cardholder Phone #:	
Cardholder Signature:	

A 5% service fee will be charged if a change is requested after the original charge(s) have been processed.

Please fax this completed form to: Michele Maxwell 717-520-5413