



## 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:   |  |
| 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](tel:717-520-5413)

All information is kept confidential and used only for the purposes noted above.