

CREDIT CARD PAYMENT FORM

It is our pleasure to welcome you here at XENIA HOTEL.

To ensure we'll have the correct information, kindly fill out the following details below for our accurate entry and further handling.

Should you have any queries, please feel free to contact us at (045) 499-0000 | 0927-881-5685 | 0908-140-7937.

Please send us a scanned copy of your duly signed authorization together with Valid Government ID of the Card Holder and Copy of the Front Part of the Credit Card thru email at reservations@xeniahotel.ph for processing.

GUEST NAME : _____
BILLING ADDRESS : _____
CONTACT NUMBER : _____
E-MAIL ADDRESS : _____
BIRTH DATE (MM/DD/YY) : _____
NATIONALITY : _____
AMOUNT : _____
CREDIT CARD TYPE : AMEX VISA MASTERCARD OTHERS: _____

Credit Card Details as follows

Name on Credit Card: _____

Credit Card Number: _____

Expiry Date: _____

I agree and authorize **XENIA HOTEL CORPORATION** to charge my credit card the amount of _____ (Philippine Pesos) as payment for room reservation/incidental charges under the name of _____, to wit;

CHECK-IN DATE: _____ **NO. OF NIGHT/S:** _____
CHECK-OUT DATE: _____ **ROOM TYPE:** _____
GUEST(S) IN THE ROOM: _____

Note: Details provided will serve as to guarantee your reservation only. Furthermore, the hotel will charge penalty in case of NO SHOW or CANCELLATION.

In addition, upon arrival or check-out from the hotel, the hotel might require the card holder to **sign the actual credit card sales slip.** We assure you that signing your actual credit card sales slip will not result to double-charging.

Any information you provide will be used for the Company's purposes only. It will not be shared with an individual or other companies, such as direct mail organizations or other third parties, unless required by law. We handle your personal data in accordance with Republic Act No. 10173, otherwise known as the Data Privacy Act of 2012.

Signature: _____

Date: _____