



1326 Ipswich Road, ROCKLEA Q 4106

I hereby authorize Rocklea International Motel to charge my credit card for the following reservation charges:

Name of Guest:

Company:

Arrival Date:

Departure Date:

- Charges Authorized:
- | | |
|--|--|
| <input type="checkbox"/> Accommodation | <input type="checkbox"/> Beverages (non-alcoholic) |
| <input type="checkbox"/> Breakfast | <input type="checkbox"/> Beverages (alcoholic) |
| <input type="checkbox"/> Lunch | <input type="checkbox"/> Functions |
| <input type="checkbox"/> Dinner | <input type="checkbox"/> All Charges |

Type of Card: Visa Mastercard AMEX (3.5% surcharge)

Card Number: _____

Cardholder:

Expiry Date: ____ / ____ CCV Number: ____

Signature:

Contact Name:

Contact Number:

Contact Email:

Please complete this form and return by email to info@rockleainternationalmotel.com.au prior to guests arrival. Please note you may be asked to supply a copy of the front of the credit card to verify authenticity.