

Booking Form and Credit Card Authorisation

Corporate Card

Private Card

Card Holder Name

Company Name

Card Holder Address

.....

.....

Tel:..... Fax:..... Email:.....

Card Type..... Card Number..... Exp Date.....

I authorise **The Bloomsbury Hotel** to use the above credit card as follows:

Guest full name (Title/First/Last)

Arrival Date Departure Date

Event Reference **ZIBR270312**

Room Rate (per night):

Double for single Occupancy including Continental Breakfast excluding 20% VAT £ 195

Double Occupancy including Continental Breakfast excluding 20% VAT £ 205

Please confirm what charges can be applied to the credit card:

- No Charges. The provided credit card is for guarantee only

- Double for Single room * - Double room *

- Dinner, Bed & Breakfast * - All Charges *

- Other Charges * (please advise)

***(Please attach a photocopy of both sides of the credit card and fax back to 020 7347 1001 or scan and email back to [Bloomsbury@DoyleCollection.com](mailto:bloomsbury@doylecollection.com))**

Comments

Authorisation Signature Date
(Card Holder Only)