



Please complete all areas below. Incomplete requests may be rejected. This form must be received at least 5 business days prior to the specified date in Event Contract, to ensure acceptable of the credit card to be charged.

GUEST INFORMATION	
Guest/Group Name	
Arrival/Event Date	
Departure Date	

NOTE: The above guest will be required to provide photo identification upon check-in.

CARDHOLDER – Please complete the following section and sign/date below:

Cardholder Name as it appears on card: _____

Business Telephone: _____ Mobile Telephone: _____

Credit Card Number: _____ Expiry: _____ / _____

Credit Card Type: _____

Issuing Bank Name: _____ Bank Contact Number: _____

Billing Address: _____

I agree to cover the above categories of charges up to a Maximum Amount of \$ _____

I agree to cover the following categories of charges (please tick):

- All charges
- Room only
- Room and Breakfast
- Room and Meals
- Incidental expenses
- Guarantee only
- Event
- Other (please specify): _____

By signing below, you authorize the hotel to charge your credit card for the charges indicated above. You further acknowledge that if 'all charges' has been selected, then all guest/group related charges (less Deposit) will be charged to the above card number at the time of check-out or event conclusion. Credit Card payments incur a merchant service fee of 1.5% in addition to the total amount payable.

Cardholder Signature: _____ Date: _____

**Please fax completed form to +61 7 3231 3139
ATTN: Hilton Brisbane**

[To view the Hilton Worldwide Privacy Policy, click here](#)

HOTEL USE ONLY :

Authorized Amount: _____ Approval Code: _____ Date: _____

HILTON BRISBANE

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