

1-877-774-4121 Fax: 865-774-1164

Credit Authorization Form

This form is required to prepay your stay in advance. If you are a group booking, purchasing a gift certificate, late arrival, rebooking, or if someone in your party is checking in that is not a name on the reservation, you will need to fax this form completed, prior to your arrival, if you wish to pay by credit card.

Please call toll-free at 1-877-774-4121 to make sure your pre-payment has been received and posted.

This form must be filled out to charge your card for more than \$100.00 for the initial payment. We also require that all identification be legible via the fax.

| Name of Guest checking in: | | |
|--|---|---|
| Name on Reservation: | | |
| Arrival Date: | Departure Date: | |
| Cabin #: | Confirmation #: | |
| Your Address: | | |
| Telephone: | Alt #: | |
| My Credit Card Number is | | |
| expiring on/ The nam I, | | |
| I, the charges of: (Please Initial your selection but 1. Room, taxes, and all fees 2. Damages and Incidental charges | - | |
| If you would like to use your card as a securit have a Credit/Debit card, Visa/Mastercard (in | ty imprint for damages, please ir their name) at check-in for a ha | nitial If not, Guest must rd copy imprint for a Security Deposit. |
| Amount to be charged to card: \$ | red along with a legible front ates your cooperation in agreeing | |
| Cardholder's Signature | | // |

Fax Number: 1-865-774-1164 2012