

Q in Fresnaye

CREDIT CARD PAYMENT AUTHORISATION FORM

Card Type please select with **X**

VISA

MASTER CARD

AMERICAN EXPRESS

DINERS CLUB

CARD NUMBER

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EXPIRATION DATE:

MONTH / YEAR :

_____ / _____

Name: (as it appears on the card) _____

Telephone number: _____

Email: _____

VERIFICATION NUMBER:

3-4 DIGITS NON-EMBOSSSED NUMBERS FOUND ON THE CARD SIGNATURE PANEL

CVV:

Payment Amount R _____

Payment purpose:

I agree to pay the above amount per card issuer agreement to **Quarters Guesthouse cc /Q on First**

Reservation Number _____ **Dated** _____

Signature

Date
