
Four Seasons Limousine

**CREDIT CARD TELECHARGE REQUEST
LETTER OF AUTHORIZATION**

I hereby authorize Four Seasons limo charges for services provided on the card below.

Please choose one: **Permanent Charge** **Event Charge**

American Express Visa MasterCard Dinners Club Novus/Discover

Please print

Credit Card Number: _____

Exp. Date: ___Month_____Year _____

Name as it appears on Card _____

Cardholder Signature _____

Company / Individual Name _____

Mailing Address: _____

Contact Information:

Office Phone# _____

Cell. Phone# _____

Home Phone# _____

Fax# _____

Would you like a receipt? (Choose one): Yes ___ No ___

If Yes, then: Mailed Faxed Other _____

*PLEASE SEND A COPY OF CREDIT CARD & DRIVER'S LICENSE (FRONT & BACK) ALONG WITH AUTHORIZATION FORM.

*ALL DEPOSITS ARE NON-REFUNDABLE UPON CANCELLATION OF RESERVATION.

*CANCELLATION POLICY: MUST CANCEL PRIOR TO ONE WEEK (7 DAYS) OF RESERVATION. IF CANCELLED WITHIN THE WEEK ENTIRE AMOUNT OWED WILL BE CHARGED TO CREDIT CARD.