



4070 Westcliff Dr.  
Hood River, OR 97031  
P: 541-386-2992  
F: 541-386-3317

### CREDIT CARD AUTHORIZATION FORM

All information is kept confidential and used only for the purposes as noted below.

Reservation Name:

Reservation Confirmation

Contact Person:

Last 4 Digits on Credit Card:

Name on Credit Card:

Cardholder Phone Number:

Credit Card Billing Address:

First and Last Name of guests authorized to stay at Westcliff Lodge under this account:

Valid Date (s):

Contact Phone:

Expiration Date:

CVV:

Check all that Apply:

<input type="checkbox"/>	Room and Tax
<input type="checkbox"/>	All Incidentals
<input type="checkbox"/>	All Charges
<input type="checkbox"/>	Guest Amenity

**I hereby authorize the charges to be applied to the credit card as listed above and allow the staff at Westcliff Lodge to update the authorized guest list per my verbal or written request.**

**Signature of Card Holder:**

**Date:**

By typing my name above, I hereby authorize Vagabond Lodge DBA Westcliff Lodge to charge my credit card in my absence for payment for the above specified reservation

Fax documents to: 541-386-3317

or email form: [reservations@westcliffodge.com](mailto:reservations@westcliffodge.com)