

Send directly to
Eréndira Ayala



Credit Card Authorization

I _____ do authorize Sheraton & Westin at Our Lucaya Beach and Golf Resort to charge the following:

Please indicate with an X the appropriate option.

Room/Tax/Service/Incidentals _____
Traditional Island View Room _____
Ocean View Room _____ Deluxe Suite _____
Single _____ Double _____ Triple _____ Quadruple _____
Arriving on: ___/___/___ Leaving on: ___/___/___

____ I will be sharing room with _____
Name(s)
____ I would like ICCL to find me a roommate

For Mr./Mrs./Ms. _____ to my
(name of person/group)

American Express ___ / Visa ___ / MasterCard ___ / Discover ___

Credit Card Number _____ CID# _____

Expiration Date: ___/___/___ Authorized Amount: \$ _____ (USD) (Cost of 1 night)

Mailing Address: _____

Telephone: _____ Fax: _____

Attached is a copy of the front and back of the above credit card and a photo identification.

Cardholder's signature

Date signed