



CREDIT CARD AUTHORIZATION FORM

Individual/Business/Group Name:	
Account Number:	
Event Date (if applicable):	
Credit Card Billing Address:	
City / State / Zip:	
Contact Phone Number:	
Contact Email Address:	

I hereby authorize Hershey Entertainment & Resorts Company ("HE&R") to apply the following amount(s) incurred and/or due and owing in connection with the agreement referenced in the Comments box below ("Agreement") to the credit card provided on this form ("Credit Card"):

Deposit/Other Amount: \$ _____

Or I hereby authorize the following charges to be applied to the following credit card. Check all that apply (applicable sales tax and service charges may apply):

- Guest Room(s) & Tax
 Food & Beverage
 Spa Services
 Country Club
 Guest Room Incidentals
 HSY Destination Services
 Other (list in comments)

Comments:	
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Credit Card Type: Visa MasterCard American Express Discover

Credit Card Number:	
Name on Card:	
Expiration Date:	
Cardholder Phone #:	
Cardholder Signature:	

A 5% service fee will be charged if a change is requested after the original charge(s) have been processed.

Please fax this completed form to: 717-520-5413

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