



Credit Card Authorization Form

Credit Card Information			
Card Type:	<input type="checkbox"/> MasterCard	<input type="checkbox"/> VISA	<input type="checkbox"/> Discover <input type="checkbox"/> AMEX
	<input type="checkbox"/> Other _____		
Cardholder Name (as shown on card): _____			
Card Number: _____			
Expiration Date (mm/yy): _____		Security Code: _____	
Billing Address:			
Address: _____			
City _____		State _____	ZIP _____

_____, authorize Duets Bed and Breakfast to charge my credit card above for agreed upon charges. I understand that my information will be saved to file for future transactions on my account and will be notified if excess fees are charged in accordance of the terms and conditions.

Customer Signature

Date

*Please note that charges will appear on card as Hickory House Properties, parent company of Duets Bed and Breakfast.