Hilton
ARUBA CARIBBEAN
RESORT & CASINO

Since the Hilton Aruba Caribbean Resort & Casino is PCI compliant, please be advised that we are no longer able to accept complete credit card numbers in written form. Please complete this form in full, but list only the last four digits of your credit card number and email back with a valid ID of the credit card holder.

Date: _____

I authorize Hilton Aruba Caribbean Resort & Casino to charge my credit card according to the details below. I GUARANTEE full payment of the account as described.

Name of Guest/Group: _____

Function / Arrival Date: N/A _____ Departure Date: N/A _____

Confirmation Number / Group ID #: Maui Derm Caribbean _____

Charge to:
Credit Card Type: _____ Expiration Date: _____

Credit Card Number: Last Four Digits Only ☐ ☐ ☐ ☐

Cardholder Name: _____
Please print

Company Name: _____

Cardholder Signature: _____

Cardholder Billing Address: _____
Number and street name

_____
City, State, Zip Code

_____
Phone Number Fax Number

_____
Email Address

Authorized Amount: $ _____

Credit card will be entered directly into our building system and charged immediately for estimated cost of your function.
Please note the following credit card fees:

- American Express/Visa/Master Card/Discover - Accumulative processed payments above $ 25,000 will have a 4% Administrative Fee.

Kindly advice us of which option you prefer to choose:

☐ Please have an authorized representative of Hilton Aruba Caribbean Resort & Casino to call me at the phone number listed above to complete the transaction.

☐ I will call **Francis Wolff** of the Hilton Aruba Caribbean Resort & Casino, at (011) 297-526-6416 to complete the transaction.

BILLING TO INCLUDE:

☐ All Charges ☐ Room & Tax Only ☐ Other Billing Instructions: _____