

CREDIT CARD AUTHORIZATION FORM

Aloha!

As part of an ongoing effort to prevent credit card fraud we ask you to authorize your deposit or final payment by signing the form below. We also ask that you review and acknowledge our payment and cancellation policy. You may fax, email or mail this form to the address listed below. Upon receipt of this form we will confirm your reservation.

Mahalo!

Guest Name:

Billing Address:

Phone Number:

Arrival Date: _____ Departure Date: _____

Deposit / Payment / Cancellation Policy:

A \$250.00 deposit is required to confirm a reservation. Full payment is due 21 days prior to arrival. There is a \$75.00 cancellation fee on all deposited reservations. To receive a refund, cancellation notice is required 21 or more days prior to arrival. If you cancel after full payment (within 21 days prior to arrival) you can forfeit everything unless you have a verifiable medical emergency. We also offer the option of rescheduling travel dates with no penalty. If this is a group booking (multiple units) there is a \$75.00 cancel fee per unit.

Authorization:

I have read the Deposit / Payment / Cancellation policy and I authorize Koa Lagoon – Bello Realty Inc. to charge \$ _____ to the credit card indicated below.

Credit Card Number: _____ Exp Date: _____

Card Holders Signature: _____ Date: _____



Koa Lagoon

Koa Lagoon – Bello Realty Inc.

800 South Kihei Road

Kihei HI 96753

1-800-367-8030 / 1-808-874-0429 *fax*

www.koalagoon.com

barron@mauigateway.com

10-11-2005