

**Boulder University Inn**  
1632 Broadway  
Boulder, CO 80302  
Phone (303) 417-1700 Fax (303) 442-8100

**Credit Card Authorization Request**  
Please type or use Block Letters

I \_\_\_\_\_, (as shown on the card) Authorize Boulder University Inn to use my credit card:

Number \_\_\_\_\_ Expiration date \_\_\_\_\_  
3-Digit Card Identification Number: \_\_\_\_\_  
Billing Address of the Credit Card: \_\_\_\_\_  
\_\_\_\_\_

To pay the charges of:

Name of Guest \_\_\_\_\_  
Confirmation Number \_\_\_\_\_  
Arrival Date \_\_\_\_\_ Departure Date or number of nights \_\_\_\_\_

I authorize the following charges:

\_\_\_\_\_ Room and Tax Only  
\_\_\_\_\_ Room, Tax and Telephone Only  
\_\_\_\_\_ All Charges including Incidentals

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Date

If you need a copy of the bill to be faxed to you upon departure, please enter the number below:

Fax: \_\_\_\_\_ Attention: \_\_\_\_\_

This credit card will be used for the charges above if an authorization from the bank is approved. One night of room and tax will be charged in the event of a no-show. Reservation must be canceled by 4pm MT. day of arrival and a cancellation number must be obtained.

NOT VALID UNLESS ACCOMPANIED BY A LEGIBLE COPY OF THE FRONT OF THE CREDIT CARD, DRIVERS LICENSE AND SIGNED BY THE CARDHOLDER.