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Huntsville, AL 35816
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Credit Card Recurring Payment Authorization Form

You authorize regularly scheduled charges to your Visa, MasterCard, American Express or Discover card. You will be charged each billing period for the total amount due for that period. The charge will appear on your credit card statement. By signing this form you give us permission to debit your account Room Charge plus Tax for your stay Over at Economy Inn & Suites.

Please complete the information below:

I _____ authorize Economy Inn & Suites to charge my credit card
(Full Name)

for Guest Name: _____ and Room #: _____
(Guest Name) (Room #)

Recurring Amount _____ Frequency Daily Weekly Start Date _____
(Amount) (Check One) (Date)

Account Type: Visa MasterCard Amex Discover

Cardholder Name _____

Account Number _____

Expiration Date _____

CVV (3 digit number on back of Visa/MC, 4 digits on front of AMEX) _____

Billing Address _____ Phone # _____

City, State, Zip _____ Email _____

SIGNATURE _____

DATE _____

I authorize the above named business to charge the credit card indicated in this authorization form according to the terms outlined above. If the above noted payment dates fall on a weekend or holiday, I understand that the payments may be executed on the next business day. I understand that this authorization will remain in effect until I cancel it in writing, and I agree to notify the business in writing of any changes in my account information or termination of this authorization at least 15 days prior to the next billing date. This payment authorization is for the type of bill indicated above. I certify that I am an authorized user of this credit card and that I will not dispute the scheduled payments with my credit card company provided the transactions correspond to the terms indicated in this authorization form.