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CREDIT CARD AUTHORISATION FORM

Please fill in all requested information below authorising Melbourne Holiday Apartments to debit your credit card for the stated amount only. Please also attach a copy of your credit card and drivers licence.

BOOKING NAME: _____

TOTAL AMOUNT TO BE CHARGED: _____

CARDHOLDER'S NAME: _____

CREDIT CARD NUMBER: _____

EXP DATE: _____ CVV: _____

CARDHOLDER'S SIGNATURE: _____

DRIVERS LICENCE NUMBER: _____ STATE: _____

Please email this completed form to Melbourne Holiday Apartments along with a picture of the front and back of the credit card and the drivers licence of the credit card holder to katrina@melbourneholidayapts.com.au