

17403 Front Beach Road • Panama City Beach, FL. 32413 Reservations: 800-488-8828 • Front Desk: 850-234-2154 Fax: 850-233-0278 • Email: info@sandpiperbeacon.com

General Authorization Form

Please complete this form and fax/email the completed form back within 48 hours.

authorize the following charges to my credit cand I agree to comply with the following terms and conditions regarding reservations.		
Reservation Name		
Arrival Date	Departure Date	
Card Number		Exp Date
Security Code	Amount of Authorized Cha	arge \$
Name As it appears on the card		
Address		
Telephone Number		
Signature of Card Holder		Date

By executing this form my authorization is given for the above charge(s) governed by the policies of the Resort stated below.

TERMS & CONDITIONS

The deposit amount authorized by the cardholder allows the Sandpiper Beacon Beach Resort to charge my card upon receipt of this form. If the remainder of the room bill is not paid in full on the scheduled day of arrival, the entire deposit amount will be forfeited. Should the reservation be cancelled more than 14 days prior to the scheduled day of arrival then a credit of all but 20% will be returned back to the card. Any cancellations or changes made less than 14 days prior to the scheduled day of arrival will result in a forfeiture of the full amount of the deposit. Reservations made less than 14 days prior to the scheduled day of arrival are non refundable.

I acknowledge that I am using my credit card for payment of a room. My authorization is given for the above charge(s) governed by the above stated policies of the Resort.