



MONACO CONDOMINIUMS
TEL: (506) 2643-3487 FAX: (506) 2643-6035
EMAIL: monacojaco@gmail.com

Monaco 1 Condominium

****CREDIT CARD GUARANTEE ****

I, _____ authorize Monaco Condominiums to charge

(Cardholder's name as it appears on the credit card)

My credit card for the following service:

Condominium reservation

Check in date: _____

Check out date: _____

Type of condominium: _____

In party: _____

Credit Card #: _____

(PLEASE BRING ORIGINAL CARD TO VERIFY ALL INFORMATION GIVEN)

Last 3 numbers on the back of the credit card: _____

Exp. Date: ____ / ____

Visa: _____ Master Card: _____

** Total Amount \$ _____ in US Dólares

** Total Amount ¢ _____ in CR Colones

Credit card holder address:

Telephone: _____ Fax: _____

Email address: _____

Date:

(Signature of card holder, as in credit card)

** I agree to pay the amount here authorized, even though I have not signed the original charge note or voucher, in case of "no show" or reservation cancellation. **

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Note: Please fax it or email back.

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