



## AUTHORIZATION FORM

By signing this form, I, \_\_\_\_\_ (credit card holder's full name as stated on the credit card), agree that The St. Regis Florence is permitted to charge my credit card for the following:

- Room + VAT + City tax only
- Room + VAT + City tax + Breakfast
- All charges
- Other (please specify) \_\_\_\_\_

I understand that the room rate per night is € \_\_\_\_\_ + City tax of € 5,00 per person per night.

Guest name(s)	Confirmation No	Arrival date	Departure date
_____	_____	_____	_____

### My credit card details are as follows:

CC type: \_\_\_\_\_ CC issuer / Name of the bank: \_\_\_\_\_  
Credit Card Number: \_\_\_\_\_ Expiry date: \_\_\_\_ / \_\_\_\_\_

Billing address (Full address of the cardholder): \_\_\_\_\_  
Name (as stated on credit card): \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Country: \_\_\_\_\_  
Tel. Nr. \_\_\_\_\_ E-Mail: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**For confidentiality and security purposes, this document may only be sent by FAX  
to the following fax number +39 055 2396097**

**Thank you**

THE WESTIN EXCELSIOR, FLORENCE – Piazza Ognissanti, 3 50123 Firenze, Italia – Tel (39) 055 27151 – Fax (39) 055 210278  
THE ST. REGIS FLORENCE – Piazza Ognissanti, 1 50123 Firenze, Italia – Tel (39) 055 27161 – Fax (39) 055 217400

Florence Management S.r.l.

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