



IN FAIRLANE TOWN CENTER
DEARBORN, MICHIGAN 48126 USA
(313) 982- 6750 or Fax (313) 982-6759

ACCOUNT # _____
BOOKING # _____

*****CREDIT CARD APPROVAL*****



FORM CANNOT BE E-MAILED - PLEASE FAX TO (313) 982-6759

GROUP NAME _____ FUNCTION DATE(S) _____

CHARGES TO BE APPLIED: FOOD & BEVERAGE ____ ROOM & TAX ____ AV ____ MISC ____ Other ____

****PLEASE BE ADVISED THAT THE CREDIT CARD WILL BE CHARGED 10 DAYS PRIOR TO THE EVENT FOR ALL ESTIMATED CHARGES. IN THE EVENT OF A DISPUTED CHARGE, PLEASE NOTIFY THE ACCOUNTING DEPARTMENT AT 313-982-6710**

CHECK APPROPRIATE CARD: AMEX _____ VISA/MC _____ DISC _____ DinersClub/CarteBlanche _____

CARD NUMBER _____ EXPIRATION _____
Mo/Yr

CARD ISSUING BANK _____

NAME APPEARING ON CREDIT CARD _____

CARDHOLDER'S ADDRESS _____

CITY _____ STATE _____ ZIP _____ PHONE _____

ADDITIONAL PERSON(S) AUTHORIZED TO SIGN FOR CHARGES TO THIS CREDIT CARD

- A. _____
Print Name Signature
- B. _____
Print Name Signature
- C. _____
Print Name Signature

BILLING ADDRESS _____

CITY _____ STATE _____ ZIP _____ PHONE _____

FAX _____ EMAIL ADDRESS _____

Cardholder's Signature _____

Date _____

PLEASE SIGN AND DATE ABOVE AUTHORIZING THE HYATT REGENCY DEARBORN TO APPLY ANY OR ALL CHARGES PERTAINING TO YOUR FUNCTION TO THE FOLLOWING CREDIT CARD



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**DIANNE LIBERTY
CONVENTION SERVICE MANAGER**