



3848 West Lakeshore Drive
Baton Rouge, LA 70808
Telephone: 225-383-2665 Telefax: 225-383-5006
www.thecookhotel.com

CREDIT CARD AUTHORIZATION FORM

I authorize The Cook Hotel and Conference Center at LSU to charge my credit card for the following guest(s) and agree to pay according to my credit card agreement:

	Confirmation #	Arrival	Departure
Guest Name	_____	_____	_____
Additional Guest(s)	_____	_____	_____
	_____	_____	_____
Room Rate (check one):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Card Holder Name	_____		
Hosting Department	_____		
Hosting Individual	_____		
Telephone	_____ () - _____		
Email Address	_____		
Credit Card Number	Exp. Date:	_____ / _____	
Card Holder Signature	_____		

* Please be advised, the guest(s) named above will be asked to provide a form of photo of identification and personal credit card to cover any incidentals they may incur at check-in.