

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): | | | \$98 Delux | xe Room edroom Suite | | |
| 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.