

Horseshoe Bay Resort is delighted to host your event. We are in the process of finalizing your reservation, and need a valid credit card to guarantee your reservation. Please provide all the information requested below to ensure prompt processing. We ask you to please *sign and date* the form before *faxing* the completed form to Group Housing at 830-598-7845.

| Group Name | | Reservation # | Reservation # | | | |
|---------------------------|-------------------|---------------------|---------------|-------|--|--|
| Cardholder Informatio | on | | | | | |
| Name as it appears on the | he credit card: | | | | | |
| Card Type: | /isa 🔲 Amex 🚺 | MasterCard Diner/CE | B Discover | 🔲 ЈСВ | | |
| Account Type: | Individual (perso | onal credit card) | | | | |
| | Corporate | Company Name: | | | | |
| Credit Card Information | | | Exp. Date | | | |
| Billing Address: | | | | | | |
| City: | | State: | Zip: | | | |
| Phone number: | | | | | | |

Each adult in the room that will be responsible for paying their own incidentals and/or a portion of the nightly rate must have a credit card on their "share". Please list the shares below.

| Share Name | Paying Nig | Paying Nightly Rate? | | # of Adults | # of Children |
|------------|------------|----------------------|--|-------------|---------------|
| | Yes | No No | | | |
| | Yes | No No | | | |
| | Yes | No No | | | |
| | Yes | No No | | | |
| | Yes | No No | | | |

I certify that all information is complete and accurate. The credit number I am providing will be used to guarantee my reservation, including a deposit of one night of my stay taken 72-hours before arrival, unless otherwise stated in my group's contract.

Cardholder Name (Printed): _____

Cardholder Signature:

Date: ____