



The Boca Raton

SINCE 1926

AUTHORIZATION FORM GUEST ROOM & CHARGES TO POSTING ACCOUNT

DATE:

COMPANY:

CONTACT:

ADDRESS:

PHONE / FAX:

E-MAIL:

We, the above mentioned company, authorize the following guest room charges to be included in our master billing. **NOTE-This form is for billing purposes only and should not be construed as a reservation form.

	GUEST NAME / CONF #	RM/TX/RST FEE	ALL CHARGES
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			

AUTHORIZED SIGNATURE:

PLEASE CHECK ANY OTHER CHARGES THAT YOU WOULD LIKE BILLED TO YOUR POSTING ACCT:

RESTAURANT CHARGES

CABANA

BANQUET FOOD & BEV

AUDIO VISUAL

TELEPHONE EQUIPMENT

ELECTRICAL EQUIP

ENTERTAINMENT / DÉCOR

SPA

GOLF /RECREATION

OTHER _____