

# CREDIT CARD AUTHORISATION FORM

## Chatter Creek Mountain Lodges Ltd.



Trip date: \_\_\_\_\_

Guest name: \_\_\_\_\_

Group organiser name: \_\_\_\_\_

**Please read and understand the following payment and cancellation policies before paying for your trip**

**1<sup>st</sup> payment** – We require a non-refundable deposit of 25% at the time of booking to confirm the reservation. If you are rebooking from the previous season, you have 2 weeks after the last day of your trip to pay.

**2<sup>nd</sup> payment** - balance of payment is due as follows:

- Trips in December & January are due **September 30**
- Trips in February are due **October 30**
- Trips in March are due **November 30**
- Sledding trips are due **February 15**

**Full payment** is due on the day of booking if you book your trip after the date the 2<sup>nd</sup> payment is due.

**All payments are non refundable.** We strongly recommend that you purchasing trip cancellation insurance.

By booking and paying for your trip you accept our terms and conditions, waiver and cancellation policies and confirm that you have considered our insurance recommendations. Please ensure you look over these policies at <https://chattercreek.ca/booking-cancellation-policy/>

Please complete this form and fax, email or mail it to us. For security reasons you may phone in your credit card number. We will process your payment upon receipt of this form on the dates due indicated above.

I will be paying for \_\_\_\_\_ seats at \$\_\_\_\_\_ per seat for a Total Trip price of \$\_\_\_\_\_

I hereby authorize Chatter Creek Mountain Lodges to charge the 1<sup>st</sup> trip payment to secure my booking. Yes:  No:

I hereby authorize Chatter Creek Mountain Lodges to charge the 2<sup>nd</sup> payment on the date specified above. Yes:  No:

[We recommend that you authorise taking the second payment at this time to ensure prompt payment and reduce administration. We will email you in the month before the payment is due to remind you that we will be taking the payment.]

Visa:  MasterCard:  [Sorry we do not accept American Express]

Credit Card # \_\_\_\_\_ Expiry Date \_\_\_\_\_

Name on Card \_\_\_\_\_ Verification Code\* \_\_\_\_\_

Signature \_\_\_\_\_ Postal Code \_\_\_\_\_

**\*Verification Code is the 3 digit number at the end of the signature strip on the back of the card**

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