THE VENETIAN° | THE PALAZZO° | SANDS° EXPO

Credit Card Authorization Form

You are requesting The Venetian | Palazzo Resort, Hotel & Casino and/or the Sands Expo and Convention Center to bill charges to your credit card for services required for the individuals/functions listed below. Please ensure this form is filled out completely and signed by the authorized card holder. Card holder must present card upon arrival.

Event or Convention Information

Group Name:		
Event Name:		
Arrival Date:		
	Credit Card Information	
Amount to be charged: \$		
If authorizing this credit card to be used for all Event	t/Convention related charges please initial here: _	
I authorize any and all charges not covered by my ac	dvance deposit and, or other deposits to be charg	ged to this credit card. The Venetian and
Sands Expo terms are 100% prepay. If the above am	ount is not 100% prepayment, The Venetian and/o	or Sands Expo is authorized to charge
the remaining amount. No additional signature will	be required.	
Credit Card Number:	Ex	piration Date: MONTH YEAR
Card Holder I	nformation As It Appears On Your Acco	<u>ount</u>
Last Name:	First name	MI:
Full Address:		Apt:
City:	State:	Zip Code:
Phone:	Facsimile:	
I authorize The Venetian Resort, Hotel & Casino to ch	narge this credit card as indicated above.	
Card Holder Signature:		Date:

To prevent unauthorized access or disclosure, we have implemented procedures to safeguard and secure the information we receive. However, we are not able to verify the security of such information during electronic transmission to us. Therefore, we recommend that this form be faxed to the number provided by your Venetian | Palazzo | Sands Expo contact or sent using email encryption technology.