



CREDIT CARD PAYMENT AUTHORIZATION

Room number: _____

To be filled out by reception

Full name / Nafn:

Permanent address / Heimilisfang:

Date of Birth / Kennitala:

VISA _____ Mastercard _____

AMEX _____ Diners _____

Other _____

Card number: _____

EXP.Date: (dd/mm) _____ / _____

Signature / Undirskrift: _____



CREDIT CARD PAYMENT AUTHORIZATION

Room number: _____

To be filled out by reception

Full name / Nafn:

Permanent address / Heimilisfang:

Date of Birth / Kennitala:

VISA _____ Mastercard _____

AMEX _____ Diners _____

Other _____

Card number: _____

EXP.Date: (dd/mm) _____ / _____

Signature / Undirskrift: _____