

Credit Card Information for Deposit

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La Casa de Mis Recuerdos provides this form in order to facilitate and finalize your booking. For information about cancellation, please refer to our [cancellation policy](#) For your utmost security, you may prefer to send us your credit card information by phone or fax rather than use the Internet. Please print this form and fill in the required data. Then send the completed form to us at: Fax (011) 52-951-51-5-5645

I, (print name) _____ hereby authorize La Casa de Mis Recuerdos to charge the below account as requested by e-mail, telephone, or letter for the specified accommodation deposit to my

(please mark) Visa MC

Card Number: _____/_____/_____/_____

Expiration date: ____/____

Name of card holder (if not identical): _____

Signature of card holder: _____ Date: _____

Deposits are subject to our [cancellation policy](#) Please, don't forget your fax number in case this document does not arrive completely: (area code + number)

My fax number _____

My Email _____

Requested Dates _____

Number in Party _____

Number of Rooms Requested _____

Type of Rooms Requested _____

Thank you for your cooperation. We're Looking forward to your visit!