

CREDIT CARD AUTHORISATION FORM

Please fill in the requested details below and enclose this form with a clear photocopy of the front and back of the credit card to us via email to restaurantconcierge@marinabaysands.com

Name Imprinted on Card : _____

Credit Card Number : _____

Date of Expiry : _____

Type of Card : _____

Card Holder's Address : _____

Name of Event/Guest : _____

Denominations/Amount : _____

Courier Charges (If Any) : _____

Details of Charges (Date of event) : _____

Contact Details (Telephone/Fax Number/ E-mail Address) : _____

CARDHOLDER AUTHORISATION

I, _____, Cardholder of the credit card (whose details are set out above) hereby authorise Marina Bay Sands Pte Ltd ("Marina Bay Sands") to charge to the said credit card such amounts incurred in respect of my stay at Marina Bay Sands.

Marina Bay Sands is at liberty, but not bound, to resort, to any other lawful means of obtaining payment and/or securing performance of this undertaking at any time and in any manner whatsoever as Marina Bay Sands thinks fit.

I understand that this authorization is irrevocable.

Agreed & Accepted by Cardholder

Date

Please Note: We recommend that this form be sent to us via Fax or secured/encrypted email. While we have implemented procedures to safeguard and secure your information, we are unable to verify the security of electronic transmissions of such information to us and shall not be liable or responsible for any unauthorized access or loss of information submitted to us.

For Official Use Only – Credit Department

Name & Signature of Officer-In-Charge : _____
(Team Member who impose this charge)

Date & Time : _____

Approval Code : _____

Remarks : _____

(Must indicate whether we obtain prior approval from guest)

Marina Bay Sands Pte Ltd

10 Bayfront Avenue

Singapore 018956

Tel: +65 6688 8868

www.marinabaysands.com