



Vendor Form for the DoubleTree by Hilton Birmingham Perimeter Park

Please have this form completed and returned to Courtney Wright at cwright@peachtreehotelgroup.com along with a completed credit card authorization form no later than 2 weeks prior to vendor arrival.

First and Last Name	
Phone Number	
Email	
Company Name	
Name and Date of Event	New Cardiovascular Horizons (NCVH) Saturday, Oct 16
# of Boxes Shipping	
# of Power Strips or Extension Cords Ordering \$10.00++ each	

****Vendors are able to bring in their own power strips/extension cords at no additional cost to the vendor****

Packages for the Event may be delivered to the Hotel no more than 3 days prior to the date of the Event. The following information must be included on all packages to ensure proper delivery:

1. Name of Organization
2. Guest's Name
3. Attention of the Catering or Conference Manager (please specify name)
4. Date of Function

A package handling charge of **\$5.00 per box** will be assessed and added to the individual account. For your convenience and safety, we ask that all deliveries made on your behalf to our Hotel be made through our loading and unloading area. This includes all outside contractors, such as musicians, florists, design companies, etc

PEACHTREE HOSPITALITY MANAGEMENT
 One Alliance Center
 3500 Lenox Road, Suite 625 | ATLANTA, GA 30326



DoubleTree by Hilton Birmingham Perimeter Park Credit Card

Authorization Form

Please fill out the following form and email to cmelton@peachtreehotelgroup.com.

This document will serve as payment and is to be held for the guest's arrival. According to Peachtree Hospitality Management's policy this document will be held in secure location until guest arrival and will be destroyed once the need for included information is outside business need of Peachtree Hospitality Management or its subsidiary.

This document is not an attempt to collect and retain any and all information about cardholder.



DoubleTree by Hilton Birmingham Perimeter Park Credit Card Authorization Form

I, _____, hereby authorize _____ to charge my credit card for the following guest(s) _____ and their hotel charges in association with:

Group Name:

Dates of Stay:

- Hotel Room, Tax(es), and Fee(s)
- Mini-Bar Snacks and Beverages
- Room Service
- Recreation / Resort Fee(s)
- Other: _____

\$_____ (USD) US Dollars - **Total Amount to be Charged**

Type of Card - AMEX - Discover - MasterCard - Visa

Cardholder Name: _____

Credit Card Number: _____ - _____ - _____ - _____

Expiration Date: _____

Cardholder ZIP Code (from credit card billing address) _____

By signing this form, you give us permission to debit your account for the amount indicated on or after the indicated date. This is permission for a single transaction only, and does not provide authorization for any additional unrelated debits or credits to your account.

Cardholder's Signature _____ **Date** _____

I authorize the above-named business to charge the credit card indicated in this authorization form according to the terms outlined above. This payment authorization is for the goods/services described above, for the amount indicated above only, and is valid for **one-time use only**. I certify that I am an authorized user of this credit card and that I will not dispute the payment with my credit card company; so long as the transaction corresponds to the terms indicated in this form.

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