

BILTMORE®

Reservation # (if known or assigned) _____

Please Circle which property applies: Village Hotel **or** The Inn

Individual Name on Reservation: _____

Date(s) of Reservation: _____

Cardholder Name (please print): _____

Cardholder Phone #: _____ email: _____

Credit Card Type: American Express Visa Master Card Discover Card

Diner's Club Other: _____

Last Four Digits of the Credit Card Number*: _____ Exp. Date: _____ / _____

*(The credit card being authorized must be the same card that was used at the time of reservation.
If using a different card, please contact 1-800-858-4130 with the full credit card number.)*

Three or four digit security code on the back of your credit card: _____



I, _____, hereby authorize Biltmore Estate to bill my credit card for the following charges:

- | | |
|--|---|
| <input type="checkbox"/> All charges | <input type="checkbox"/> Room & Tax/Package |
| <input type="checkbox"/> Estate Activities/Tickets | <input type="checkbox"/> Food & Beverage |

Advance Deposit \$ _____ (paid at time of reservation)

Balance Due \$ _____ (this amount will be charged upon receipt of authorization form)

Cardholder signature: _____ Date: _____

Please fax or mail a legible copy of the authorization form at least 7 days prior to reservation date.

Mail to:

The Inn on Biltmore Estate

Front Desk Manager, Biltmore Estate,
1 Antler Hill Rd, Asheville, NC 28803 or Fax to: 1-828-225-1629

Or

Village Hotel on Biltmore Estate

Front Desk Manager, Biltmore Estate,
207 Dairy Road, Asheville NC 28803 or Fax to: 1-828-257-5987

Comments: _____
