Vacation Rental Third-Party Payment Consent Form

Rental Property & Reservation Information

Property Name/Address	
Reservation Number	
Obsala la Data	
Check-In Date	
Check-Out Date	
Primary Guest Name	
Third-Party Payer Information	
Name	
Name	
Relationship to Guest	
Phone Number	
Email Address	
Payment Information	
Amount to be Paid	

Payment Method

Cardholder Name (if applicable)	
Last 4 Digits of Account/Card	
Consent & Authorizatio	on
By signing below, I, the undersigned thi agree to be bound by the property's rer	ird-party, authorize the above payment for the specified reservation and ntal terms and policies.
Third-Party Payer Signature	
Date	
Primary Guest Signature	
Date	