

Remittance

				Α	CCOU	NT PA	YMEN	ΙΤ								
I hereby authorize deposit/s	settlement of	all outs	tandir	ıg ac	counts	at RAC	V/RA	CT F	lobar	t Apa	ırtment	Hote	el.			
Name																
Date of Stay/Event:	e of Stay/Event: Amount:															
Other:															_	
Method of Payment	for Depos	sits aı	nd F	inal	acco	unt:										
□ EFT payment Bank Details: Account Name: Bank: Address: BSB No.: Account No.:	RACV/RAC National Au 154-156 Co 083-001 94-641-198	istralia E Illins Str	3ank			I										
Please add your n	ame/compar	ny/even	t/conf	irmat	ion nun	nber in	refere	ence	field							
☐ Company Cheque arrival)	Please ma	ke cheq	lue pa	ıyabl	e to 'RA	CV/RA	ACT H	lobar	t Apa	rtme	nt Hote	el" (or	nly av	ailable	e for de	posits prior to
□ RACV Club Member A	ccount (Fina	al accoi	unt o	nly)												
Account Name:											-					
Account Number:											_					
☐ Credit Card:																
F																J
I authorise the RACV Hoba	rt Apartment	Hotel to	debi	t my	credit c	ard in p	oayme	ent fo	r the	depo	osit / Ad	ccour	nt pay	ment.		
Name on Card:											-					
Cardholders Signature: _											_					
☐ Visa	☐ Maste	erCard			1 Ame	<			Diner	S						
																7

Please note that as per International Payment Card Industry Data Security Standards, on completion of this transaction your Credit Card details will be destroyed. We are unable to place credit card details on file for future payments

Please return this by return mail or fax to RACV/RACT Hobart Apartment Hotel on 03 6270 8699 It is a requirement of the PCIDSS that Credit Card details **must not** be transmitted via email