

Declaration of assumption of costs

We hereby confirm that the costs of the following booking at Hotel Hohenstaufen will be taken over by our company.

Billing Address:

Company name (full): _____
 Contact person: _____
 Address: _____
 Address: _____
 Telephone: _____
 e-mail: _____

Credit card details: Visa Mastercard AMEX
 Credit card use: guarantee the booking charge the amount due
 Type of card: company credit card individual credit card

Credit card owner: _____
 Credit card number: _____
 Expiration date: _____

Following costs will be covered by us:

Reservation No.: _____
 Name of the guest/s: _____
 Arrival: _____
 Departure: _____
 Services: overnight stay breakfast other
 Total amount per day and room in €: _____

We hereby authorize Hotel 41 GmbH (Hotel Hohenstaufen) to charge the specified credit card or to issue an invoice for the amount due. The term of payment for invoicing is 7 days after receipt - without deduction. After this period, the credit card specified above will be charged accordingly.

We hereby accept this declaration of assumption of costs in accordance with the General Terms and Conditions of Hotel 41 GmbH and the above conditions.

Signer's Name (in block capitals): _____
 Date: _____

Stamp & Signature: _____

Please return this completed form per e-mail: info@hohenstaufen.de or fax: +49 261 3014444.

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