

# Stratton Mountain Resort Credit Card Authorization

This is a letter of authorization instructing the Stratton Mountain resort to process charges/services on the following credit card:

Name as it appears on the credit card: \_\_\_\_\_

Billing Address \_\_\_\_\_

Email Address \_\_\_\_\_

Type of credit card: \_\_\_\_\_

Credit Card #: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Additional Instructions: \_\_\_\_\_

Authorized signature: \_\_\_\_\_

**Please mail or fax this authorization to:**  
**Stratton Mountain Resort**  
**Attn: Melissa Reece/Membership Services**  
**5 Village Lodge Road**  
**Stratton Mountain, VT 05155**  
**Fax: 802-297-4038**  
**Phone: 802-297-4039**

**\*Office Use Only\***

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**Employee receiving form**  
**(please print)**

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**Date**

Stratton Mountain Resort 5 Village Lodge Road Stratton Mountain, Vermont 05155  
Phone: 1-802-297-4039 Fax: 1-802-297-4038