



Legacy Vacation Resorts

Post Office Box 690999

Orlando, FL 32869-0999

Reservations Fax: 407-997-3069

Reservations: 1-866-507-1428

E-mail: rentalsalesteam@legacvacationclub.com

Cardholder Name:			
Credit Card Type:			
Credit Card Number:			
Exp. Date:	CVV #:	Amount of Charge:	
Reservation Name & Number:			
Resort Fee? <input type="checkbox"/> <input type="checkbox"/> YES NO Security Deposit? <input type="checkbox"/> <input type="checkbox"/> YES NO	Comments:		

I authorize Legacy Vacation Resorts to charge the above card for the amount shown.

Signature: _____ Date: _____

Please return this form to Legacy Vacation Resorts Reservations with your signature, by fax or e-mail scan in order to validate your purchase.

Please be sure to include a clear and legible copy of the card holder's Identification Card or Driver's License with this form, and any details on the form in the comments portion, such as: Room and Tax, Resort Fees, Security Deposit. Etc. Please understand that if you are approving us to use the Credit Card on the Authorization Form for the Security Deposit, you will be responsible for any damages to the unit or incidental charges the guest may incur during their stay with us.

Thank you again for choosing Legacy Vacation Resorts. If you have any questions, please feel free to contact Reservations at 1-866-507-1428 or visit us online at www.LegacyVacationResorts.com.

Sincerely,
Legacy Vacation Resorts

Toll Free: 1-866-507-1428 | www.LegacyVacationResorts.com