



AUTHORIZATION FORM

DATE: _____

CARD HOLDER NAME: _____

ADDRESS: _____

TYPE OF CREDIT CARD: _____ (Visa or MasterCard)

CARD NUMBER: _____

EXPIRE DATE: _____

CVV NUMBER: _____

AMOUNT:

I authorize Salt (Vasileiou Georgios) to charge my credit card with the above amount, as a deposit for the reservation of one

_____ (the type of the room/ how many persons)

From the ____ / ____ / ____ to ____ / ____ / ____ I'm aware, that if I cancel this booking in less than 21 days before the arrival date, this deposit will not be refunded.

Your name & signature

To protect your personal data, Salt Suites & Executive Rooms has formed Privacy Policy according to GDPR which can be found on the website www.salt-milos.com and in printed form as well, at the reception area. Collected data are those that exclusively required for the needs of our rendering of services as they are detailed on the privacy policy and used exclusively for the needs they are collected for, excluding any other use of those. While you sign the current document, you reassure that you have already known about the Privacy Policy which our company follows and you give us the permission to use your personal data for the uses that have written above. If any time you wish to delete your personal data from our company's database please contact us via e-mail, on the following address: info@salt-milos.com