

Premium IV

VIP Concierge Services
Saint Barthélemy

www.premiumiv.com

(+59) 0590 290 007
concierge@premiumiv.com

Full Name: Mr <input type="checkbox"/> Mrs <input type="checkbox"/>		
Home Address:		
City:		
State		
Zip Code:		
Country:		
Phone Number:		
Fax Number:		
E-mail Address:		
Date of Birth (optional):		
Number of people in Party:		
Arrival:		
Arrival St Maarten	Date	
	Time	
	Flight	
Depart to St Barts		
	Date	
	Time	
	Flight	
Departure:		
Departure St Barts	Date	
	Time	
	Flight	
Departure St Maarten		
	Date	
	Time	
	Flight	
Place of Stay:		
Booking/Villa Agency		
Location on the Island:		
Contact Number on Island		
How did you hear of us?	Search Engine (which?)	
	Website (which?)	
	Publication (which?)	
	Word of Mouth (who?)	



Letter of Authorization to Charge Credit Card

In lieu of my credit card imprint I, the undersigned, _____, as
(Print Name)

the credit card holder hereby authorize Premium IV, St Barthelemy to charge my credit card account in the amount not to exceed _____ euro's.

I agree that credit card processing fees in the amount of 3.2% related to this transaction will be charged directly to the total of products and services supplied by Premium IV.

Credit Card Type () Visa () Mastercard () Amex

Credit Card No # _____

Expiry Date : _____ CVV2/ CID Security Code : _____

Name as it appears on the Credit Card : _____

Credit Card Billing Address : Street : _____

City : _____ State : _____

ZIP Code : _____ Country : _____

Telephone : Day Time : _____ Evenings : _____

Cellphone : _____ Email : _____

I agree that in the event my credit card becomes invalid, I will provide Premium IV with a new valid credit card immediately upon request to be charged for the payment of any outstanding balances owed to Premium IV.

I agree to waive any charge back rights and in the event of a dispute, requests for a refund must be submitted in writing to Premium IV offices in St Barthelemy.

This authorization is binding in accordance with the agreement governing the use of stated credit card under French law in the territory of St Barthelemy, French West Indies.

Please fax this authorization form to Premium IV offices at (011) 59 0590 290 008 or scan and e-mail to concierge@premiumiv.com

I further authorize Premium IV to use my faxed or scanned signature in executing payment for products and services supplied.

I have read and agree to all the above terms and conditions.

Cardholders Signature : _____ Date : _____



Premium IV Client Checklist

Will you require a rental car?	Yes / No
If yes please specify type and dates.	
If no please indicate with whom you have rented to organise delivery	
Would you like your Villa Prestocked before arrival? Food, beverages, flowers.	Yes / No
Are you interested in Massage and Spa Treatments?	Yes / No
Are you interested in boat trips, diving or excursions?	Yes / No
Are you interested in tennis, fitness, yoga, fitness equipment?	Yes / No
Would you like a private chef to cook for you?	Yes / No
Would you like us to provide you with a babysitter?	Yes / No
Can we help you with restaurant reservations?	Yes / No
Is there a special event, party or wedding you would like organised?	Yes / No