

Hotel Cancellation Dispute Form

Name: _____

Card number: _____

Transaction date: _____ Merchant name: _____

Transaction amount: \$ _____ Dispute amount: \$ _____

Cardholder signature Date

* Date reservation made: _____

* For what arrival date: _____

Was confirmation number given: No Yes

- If yes, provide number here: _____

How was reservation made?

Directly with hotel Hotel chain 800 # Hotel website Third party (ie: Expedia, Travelocity, travel agency, etc.)

* Was cancellation policy told to you: No Yes **OR** clearly displayed on the website: No Yes

* Cardholder's understanding of cancellation policy: _____

* Date of cancellation: _____ Time of cancellation: _____ (in hotel's time zone)

- How did you cancel: Phone Internet Fax

* Was cancellation number given: No Yes

- If yes, provide number here: _____

If no cancellation number given, name of person spoken to: _____

Was cancellation policy followed: No Yes

Any other pertinent information: _____

* (asterisk) Denotes required information for the dispute