



Hotel Name: Hilton Waikoloa Village
 Address: 69-425 Waikoloa Beach Drive, Waikoloa, HI 96738

Telephone: (808) 886-1234, ext 2866
 Fax #: (808) 886-2905 OR 2975

CREDIT APPLICATION
 Confidential Information

Name of Company Requesting Direct Billing: _____
 Address: _____ Telephone: (_____) _____
 City: _____ State: _____ Zip: _____
 Dun & Bradstreet Number: _____ Rating: _____ (Listed in the Name of _____)
 Group Name: _____
 Inclusive Booking Dates: _____
 Group Contact: _____ Fax #: (_____) _____
 Address: _____ Telephone: (_____) _____
 City: _____ State: _____ Zip: _____

DIRECT BILLING HAS BEEN REQUESTED AS INDICATED:

- 1. Guest Room Accounts: All charges for specified guests—**provide list**
 Room & tax only for specified guests—**provide list**
- 2. Catering: All Catering/Banquet charges
- 3. Miscellaneous: Provide List

BANK REFERENCES:

Bank Name: _____ Contact: _____
 Full Address: _____
 City: _____ State: _____ Zip: _____
 Telephone: (_____) _____ Account #: _____ ABA#: _____
 City: _____ State: _____ Zip: _____

HOTEL REFERENCES (Most Recent History – Please Do Not List References Older Than Two Years):

- 1. Hotel Name: _____ Dates: _____
 Full Address: _____ Telephone: (_____) _____
 City: _____ State: _____ Zip: _____
- 2. Hotel Name: _____ Dates: _____
 Full Address: _____ Telephone: (_____) _____
 City: _____ State: _____ Zip: _____
- 3. Hotel Name: _____ Dates: _____
 Full Address: _____ Telephone: (_____) _____
 City: _____ State: _____ Zip: _____
- 4. Hotel Name: _____ Dates: _____
 Full Address: _____ Telephone: (_____) _____
 City: _____ State: _____ Zip: _____

AGREEMENT & RELEASE:

I (We) agree if credit is extended, to pay the amount due upon receipt of the first statement. In accordance with the Privacy Act, Freedom of Information Act, and the Fair Credit Reporting Act, and any similar federal, state or local statutory or common laws or regulations, I (We) expressly authorize the above-named references, any credit reporting agency, any law enforcement agency (federal/state/local) and any person or entity with knowledge of information relevant to this request for credit to release this information to the hotel (together with its owners, partners, parent, subsidiaries and affiliates, and their officers, directors, agents and employees, 'Hotel') and Hotel to request, obtain and use such information as it sees fit. I (We) hereby agree to release, indemnify, defend and hold harmless Hotel and any all other persons or entities, including without limitation those providing information, from any and all liability for losses, claims, injuries, liabilities, and damages of whatever kind or nature, whether known or unknown, including without limitation those based on defamation, invasion or privacy, and rights of publicity and personality, which may at any time arise or accrue to me (us) or my (our) heirs, successors, parents, subsidiaries, assigns, officers, directors, employees, agents or other persons or entities claiming by our through us, on account of provision of such information or reliance on such information or on other information gathered pursuant thereto and hereto. I (We) hereby authorize this Credit Application and release to be shown and delivered to such persons, with a copy of this Credit Application and release to be as valid as the original.

Authorized Signature: _____ Date: _____

DO NOT WRITE BELOW THIS LINE—FOR OFFICE USE ONLY

Estimated Amount of Charges—To be Completed by Originator
 Rooms: \$ _____ Credit Approved By: _____

Catering/Banquet: \$ _____
Meeting Room Rental: \$ _____

Other: \$ _____
Total \$ _____
\$ _____

Sales Rep: _____ File # _____
Convention Services Rep: _____
Catering Rep: _____
\$ _____

Date: _____
Credit Limit: _____

Credit Denied: _____
Advance Deposit Required: _____

Deposit Received: _____
(Always Attach Copy of Contract)