

Sweetheart's Limousine Reservation Form

Booking Agent		Company	
Agent Phone		Alternate	
Agent Email		Referral Source	
Today's Date		Service Date	

Passenger Information

Customer Name		Email Address	
Contact Phone		Alternate Phone	
Emergency Contact		Phone Number	

Event Information

Pickup		AM/PM	Drop-off Time		AM/PM	#of Passengers	
Event Occasion				Car/Driver/Attire			
Pickup Address				Drop-Off Address			
Itinerary/Stops, Special Requests, Comments or Directions (I.e. Colors used, water, ice, when to use red carpet, chaperone needed?) Upgradeable?							

Action Taken

New Order	Change1	Change2	Cancel Order
Limousine Company Approval – Office Must Return Fax For Confirmation of Order or Change			
Date/Initials/Faxed	Date/Initials/Faxed	Date/Initials/Faxed	Date/Initials/Faxed

Billing Information

Type of Credit Car		Hourly Rate	\$	
Name as it appears on Card or Company Account Name		Travel Fee	\$	
Credit Card Number		Add On	\$	
Expiration Date		Gratuity	\$	
Billing Address CC goes to or Company Invoice Address/Fax		Deposit (non-refundable)	\$	
		Remaining Balance	\$	
By signing I authorize Sweethearts to charge this account				

PO Box 1121 Kodak TN, 37764 Phone: 865-397-limo Fax: 865-484-0565 <http://www.sweetheartlimos.com>

Upgrade to larger Vehicle if car selected is unavailable yes _____, no _____