

JR. LIMOUSINE INC.

FAX RESERVATION FORM

Please provide a photocopy of your credit card (both front and back) and your driver's license on a separate page. Then FAX them to us at (773) 538-4666 with your reservation details below.

Date: _____ Day: _____ Pick-up time: (am/pm) _____

Name of passenger(s): _____

Number of passengers _____

Vehicle requested: _____

Do Not Up grade: _____

Pick-up address phone number: _____

Pick-up from (full address): _____

Pick-up airport: _____ Flight number _____

Carrier or FBO: _____

Arriving From: _____

Tail Number (if applicable): _____

Arrival time: (am/pm) _____

Destination 1: _____

Destination 2: _____

Destination 3: _____

Drop off time: _____

Drop off address (full address): _____

Drop off airport: _____ Departure time: (am/pm) _____

Carrier or FBO: _____

Tail Number (if applicable): _____

Special instructions or Requests: _____

Name of person making this reservation: _____

Name of person(s) who can authorize additional service: _____

Phone number of the person making this reservation: _____

Fax number of the person making this reservation _____

Name of company: _____