

## Wedding Reservation

## \*\*\*PLEASE COMPLETE ONE DOCUMENT FOR EACH VEHICLE BOOKED\*\*\*

| Wedding Date:  | Day of the Week:  |
|--|---|
| # of Hours:  | # of Passengers:  |
| Type of Vehicle:   | Start Time/End Time:  |
| Bride's Full Name:   | Bride Contact Number:   |
| Groom's Full Name:   | Groom Contact Number:   |
| Email Address to send confirm  | ations and receipts:  |
| Initial Pick-up Address:   |   |
| Church Name and Address:   |   |
| Pictures:  |   |
| Reception Name and Address:  | EMIDIDE I   |
| Additional Stops (if any):   |   |
| Total Contracted Price: \$   | LIMOUSINE   |
| 30% Non-refundable Deposit   |   |
| to be paid: \$   |   |
| Balance after Deposit is   |   |
| made: \$   |   |
| credit card **   | o weeks prior to the reservation date. If we do not receive payment, balance will be charged to below |
| Credit Card Number:  | Expiration / CV2::  |
| Full Name on Card:   |   |
| Billing Address:   |   |
| By signing this document I agree the above information is correct and I authorize Empire Limousine to charge the above amounts to the credit card I provided. I understand that any/all deposits are non-refundable. |   |
| Authorized Signature for Control You will receive an official  | ard:<br>I confirmation within 2 days of this booking.   |