

CREDIT CARD AUTHORIZATION CONTRACT

I authorize GO Airport Shuttle to charge my (check one):

_____ Master Card _____ Visa _____ American Express _____ Diners _____ Other

The card number is: _____ Expiration Date: ____/____/____

Name as it appears on the card: _____

Total amount to be charged to my credit card \$ _____*

For service quotes that do not include gratuity to the driver, a minimum 15% gratuity will be added.

The service to be provided is as follows:

Date: _____ Passenger(s) Name: _____ Number of passengers _____

Pick up point: _____ City _____

Pick up time: _____ Destination: _____

Type of vehicle requested: Sedan _____ Van _____ Other _____

Please note our cancellation policy:

To avoid a charge to your credit card, please cancel at least 2 hours prior to your pickup time.

Please provide us with the following information (if applicable):

Airport: _____ Airline: _____ Flight #: _____

Departure/Arrival Time _____ Where flight originated: _____ Customs Flight?: _____

Seaport: _____ Ship: _____

The charges for Airport and Seaport pick ups allow for a maximum of one hour, there will be an additional charge if the pick up exceeds that time. If you cannot locate the driver, please call us immediately at the TOLL FREE NUMBER 1-800-244-8252 (In Broward call (954) 561 8888).

Fill out this section if it is applicable:

of vehicles: _____ Type of vehicle _____ # of hours: _____ # of passengers: _____

Special requests(return information) _____

We will try to accommodate special requests when possible.

Person(s) authorized to make arrangement(s) in my name:

Name: _____ Phone # (____) _____

Address: _____ Fax #(____) _____

I understand that my signature on this contract along with a copy of both sides of the signed credit card will serve as my authorized signature on the credit card slip. For unsigned cards, you should also fax a copy of the cardholders' driver's license.

SIGNATURE OF CARD HOLDER

Print name as it appears on card

Address (____) _____ (____) _____
Phone Fax

Company name (when applicable) (____) _____
Cell Phone

* I authorize additional charges for additional service as requested. _____

Signature

Fax contract to (954)565-7054. If you have any questions, please call (954)561-8888 and ask to speak to _____

Pickups need to be cancelled 2 hours in advance of pickup time in order to avoid the charge to your credit card.