

Crown Limousine, Inc

WEDDING CONTRACT

Print and complete this form and fax to 215.689.4828

Wedding Day _____ Date _____

Number of Hours: _____ (3 hours min.), from _____ (am/pm) to _____ (am/pm)
Number of Limousines: _____ Number of passengers: _____ Vehicle Color _____

Full Names: Bride: _____
Phone: _____
Groom: _____
Phone: _____

Phone # where either bride or groom can be reached on wedding day: _____
Initial Pick-Up Address: _____
Destination Name and Address: _____
Reception Hall and Address: _____
Use After Reception? _____
Other details or information: _____

Please attach additional sheets for any information you believe necessary to help us serve you best.

\$ _____ Per Hour @ _____ Hours X _____ (# of limousines): \$ _____
20% Gratuity: \$ _____
Total: \$ _____
\$100.00 Non-Refundable Deposit to Reserve Vehicle(s) & Date: \$ _____
Balance Due on Wedding Day: \$ _____

All weddings must be guaranteed by credit card and deposit received to confirm reservations.
All weddings must be cancelled at least 2 weeks prior to event date to avoid the full charge.

_____ To pay deposit by check, mail form and check to 15 Joshua Dr, Richboro, PA 18954.
_____ To pay deposit by credit card, fill in information below and fax form to 215.689.4828.

Circle one: Visa / MasterCard / American Express
Credit Card Number: _____
Expiration Date: _____ CVV Code: _____

(CVV code is last 3 digits on back of credit card if Visa or MasterCard, if American Express—the 4 digits on front of credit card above the credit card number)

Full Name on Card: _____ Authorization Signature: _____
Billing Address for the credit card: _____

Crown Limousine, Inc.
Business: (215) 322.2888 Fax: (215) 689.4828
15 Joshua Dr, Richboro, PA 18954