Ole Skool Shuttles & Party Bus

C.R.Rhodes & Associates, L.L.C. ∙ 102 Genessa Court, Mansfield GA 30055 ∙ 770-314-2700

**Booking Contract**

Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Trip Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Alternate Trip Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Pick UP Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Time:\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Hrs Booked:\_\_\_\_\_

Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Contact #:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip:\_\_\_\_\_\_\_\_\_\_\_

Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Trip Destination:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Number of Passengers:\_\_\_\_\_\_\_\_\_\_\_\_

Estimated Round Trip Miles:\_\_\_\_\_\_\_ Fuel: $\_\_\_\_\_\_\_

Price Quote: $\_\_\_\_\_\_\_\_ Taxes:$\_\_\_\_\_\_\_\_ TOTAL DUE: $\_\_\_\_\_\_\_\_\_\_

**Payments**

Deposit Credit Card. Type:\_\_\_\_\_\_\_\_Card #:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Exp:\_\_\_\_\_\_\_\_\_ CVC #:\_\_\_\_\_\_\_\_\_

Name on Card:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Card Billing Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_City:\_\_\_\_\_\_\_\_\_\_\_\_\_ State:\_\_\_\_\_\_\_\_ Zip:\_\_\_\_\_\_\_\_\_

Phone #:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Alternate #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Amount Billed to Card: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Deposit: YES/NO Balance Owed: $\_\_\_\_\_\_\_\_\_\_\_\_\_

Balance Paid: $\_\_\_\_\_\_\_\_\_\_\_ Date Paid: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ have read and fully understand these rules and regs regarding my planed trip with C.R.Rhodes & Associates, L.L.C. By reading and understanding, I will follow these rules and regs and make sure that all of the other riders in my party will do the same. I also understand that my credit card could potentially be billed for damages, extra hours or clean up fees***

***and***

***I\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ have read and fully understand this contact. I agree to the charges listed and agree to be responsible for complete payment. I authorize the use of this credit card for this purpose and have not obtained this card illegally. I further more authorize use of this card for any charges incurred during my trip as in over hour payments, damages, and or cleaning fees.***

 Sign:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_

**Passengers Under age of 21**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age: \_\_\_\_\_\_ Before: \_\_\_\_\_\_\_ Rtrn:\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age: \_\_\_\_\_\_ Before: \_\_\_\_\_\_\_ Rtrn:\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age: \_\_\_\_\_\_ Before: \_\_\_\_\_\_\_ Rtrn:\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age: \_\_\_\_\_\_ Before: \_\_\_\_\_\_\_ Rtrn:\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age: \_\_\_\_\_\_ Before: \_\_\_\_\_\_\_ Rtrn:\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age: \_\_\_\_\_\_ Before: \_\_\_\_\_\_\_ Rtrn:\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age: \_\_\_\_\_\_ Before: \_\_\_\_\_\_\_ Rtrn:\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age: \_\_\_\_\_\_ Before: \_\_\_\_\_\_\_ Rtrn:\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age: \_\_\_\_\_\_ Before: \_\_\_\_\_\_\_ Rtrn:\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age: \_\_\_\_\_\_ Before: \_\_\_\_\_\_\_ Rtrn:\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age: \_\_\_\_\_\_ Before: \_\_\_\_\_\_\_ Rtrn:\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age: \_\_\_\_\_\_ Before: \_\_\_\_\_\_\_ Rtrn:\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age: \_\_\_\_\_\_ Before: \_\_\_\_\_\_\_ Rtrn:\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age: \_\_\_\_\_\_ Before: \_\_\_\_\_\_\_ Rtrn:\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age: \_\_\_\_\_\_ Before: \_\_\_\_\_\_\_ Rtrn:\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age: \_\_\_\_\_\_ Before: \_\_\_\_\_\_\_ Rtrn:\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age: \_\_\_\_\_\_ Before: \_\_\_\_\_\_\_ Rtrn:\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age: \_\_\_\_\_\_ Before: \_\_\_\_\_\_\_ Rtrn:\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age: \_\_\_\_\_\_ Before: \_\_\_\_\_\_\_ Rtrn:\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age: \_\_\_\_\_\_ Before: \_\_\_\_\_\_\_ Rtrn:\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age: \_\_\_\_\_\_ Before: \_\_\_\_\_\_\_ Rtrn:\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age: \_\_\_\_\_\_ Before: \_\_\_\_\_\_\_ Rtrn:\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age: \_\_\_\_\_\_ Before: \_\_\_\_\_\_\_ Rtrn:\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age: \_\_\_\_\_\_ Before: \_\_\_\_\_\_\_ Rtrn:\_\_\_\_\_\_